

**THE RESPONSIVENESS OF RURAL PRIMARY SCHOOLS TO THE NEEDS OF
ORPHANED AND VULNERABLE CHILDREN IN ZIMBABWE**

by

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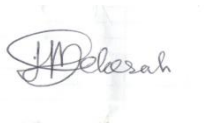
- “All children are born to grow, to develop, to live, and to articulate their needs and feelings for their self-protection” (Miller, A. n.d). <http://www.azquotes.com/quote/857755>
- The children must, at least, play in the open veld, no longer tortured by the pangs of hunger or ravaged by the scourge of ignorance, and no longer required to engage in deeds whose gravity exceeds the demands of their years (Nelson Mandela, December 1993).

DECLARATION

STUDENT NUMBER: 3118-246-1

I, Dekeza Clyton, declare that the thesis entitled: **The Responsiveness of Rural Primary Schools in Zimbabwe to the Needs of Orphaned and Vulnerable Children** is my own work and all the sources that I have used or quoted have been indicated and acknowledged by means of complete references.

I further declare that I have not previously submitted this work, or part of it for examination at UNISA for another qualification or any other higher education institution.



Signature... ..Date.....6/11/17.....

C.Dekeza

DEDICATION

This work is dedicated to the following;

- The Almighty God for His guidance and protection throughout the period of study.
- My mother who passed on when this thesis was in progress.
- My two sons, Anotidashe and Timirenashe, as well as my daughter, Sharon.
- All my family members.
- All Church of Christ members at Shakashe congregation for their prayers.

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- The Provincial Education Director and the District Education Officer Masvingo district, Zimbabwe for facilitating the data collection process;
- School principals for allowing me to carry out the study in their respective schools;
- Parents and guardians of in-school orphaned and vulnerable children (OVC) who permitted their children and dependents to take part in the study; and
- School counsellors who participated in this research.

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ABSTRACT

The aim of this study was to investigate the responsiveness of rural primary schools in Zimbabwe to the needs of in-school OVC.

The study adopted a qualitative approach in which the phenomenological and case study designs were employed to study in-school OVC in their natural setting. The target population for the study comprises OVCs, principals and school counsellors. From this population, a sample of 24 participants was purposively drawn. Data was collected from the participants in the three sampled rural primary schools in Masvingo district through in-depth interviews, focus group discussions, document analysis and observation. Tesch's model was applied to analyse data qualitatively.

The study revealed that rural primary schools' capacity to address the needs of in-school OVC was deemed ineffective by all the participants due to a myriad of factors which include *inter-alia*: lack of specialist school-counsellors; lack of funds to initiate school-based projects aimed to assist OVC; lack of a comprehensive school-feeding scheme; and a dearth of workshops to equip principals and teachers with knowledge to handle and deal with OVC. To improve the responsiveness of schools to the needs of OVC the study recommends that the Ministry of Higher and Tertiary Education should train specialist counsellors in teachers' colleges. The study also recommends that the government should increase funds allocated for the Basic Education Assisted Module scheme to cater for more OVC. In addition, the study recommends that the Ministry of Primary and Secondary Education should conduct workshops in schools on how to deal with challenges confronting OVC. Lastly a model to improve rural primary schools' capacity to address the needs of OVC was suggested, which proposes partnerships among stakeholders in projects aimed at supporting in-school OVC.

Key terms: Responsiveness, needs, orphaned and vulnerable children, rural primary school, principal, school-counsellor, HIV and AIDS, psychosocial needs, material needs, counselling, Zimbabwe

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ACRONYMS

ACRWC	African Charter on the Rights and Welfare of the Child
AIDS	Acquired Immune Deficiency Syndrome
BEAM	Basic Education Assisted Module
BED	Bachelor of Education Degree
BSc	Bachelor of Science
CBAP	Community-Based AIDS Programme
CCT	Child Care Teams
CDD	Community-Driven Development
CFCs	Child-Friendly Schools
CINDI	Children in Distress Network
COPE	Community-based Options for Protection and Empowerment
COSC	Cambridge Overseas School Certificate
CRC	Convention on the Rights of the Child
CRS	Catholic Relief Services
DANIDA	Danish International Development Agent
DED	Doctor of Education
DESD	United Nations Decade of Education for Sustainable Development
DSS	Department of Social Services
EBRD	European Bank for Reconstruction and Development
ECD	Early Childhood Development
EFA	Education for All
ESPP	Enhanced Social Protection Project
FBO	Faith-based Organisation
FGD-A	Focus group discussion A
FGD-B	Focus group discussion B
FGD-C	Focus group discussion C
FOCUS	Families, Orphans and Children under Stress
GNU	Government of National Unity
GoZ	Government of Zimbabwe
HIV	Human Immune Deficiency Virus
HSRC	Human Sciences Research Council

IPA	Interpretive Phenomenological Analysis
MDC	Movement for Democratic Change
MDGS	Millennium Development Goals
MED	Master of Education
MGLSD	Ministry of Gender Labour and Social Development
MLSS	Ministry of labour and Social Services
MLSW	Ministry of Labour and Social Welfare
MoESAC	Ministry of Education Sports, Arts and Culture
MoHCW	Ministry of Health and Child Welfare
MoLSS	Ministry of Labour and Social Services
NAC	National AIDS Council
NAP	National Action Plan
NAPI	National Action Plan 1
NAPII	National Action Plan 11
NGO	Non-governmental Organisation
OVC	Orphans and Vulnerable Children
PCI	Project Concern International
PED	Provincial Education Director
SADC	Southern African Development Community
SCM-A	School counsellor male A
SCF-B	School counsellor female B
SDGS	Sustainable Development Goals
SEDAP	Social and Economic dimension of an aging population
SI	Statutory Instrument
SP-A	School Principal A
SP-B	School Principal B
SP-C	School Principal C
SPTRG	Social Protection Technical Review Group
SWAAT	Society for Women and AIDS in Africa
UN	United Nations
UNAIDS	Joint United Nations Programme on HIV/AIDS
UNCRC	United Nations Convention on the Rights of the Child

UNESCO	United Nation's Educational Scientific and Cultural Organisations
UNGASS	United Nations General Assembly Special Session
UNICEF	United Nations Children's Fund
UNISA	University of South Africa
UNLD	United Nations Literacy Decade
USAID	United States Agency for International Development
WFP	World Food Programme
WHO	World Health Organization
ZIMSTAT	Zimbabwe National Statistics Agency

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CHAPTER 1

INTRODUCTION AND BACKGROUND

1.1 INTRODUCTION

Orphaned and vulnerable children (OVC) present caring and supporting challenges to families and communities. One of the major causes of vulnerability of children is HIV/AIDS. According to Kiambi and Mugambi (2017:180), more than 15 million children under the age of 17 most in sub-Saharan Africa have lost one or both parents to HIV/AIDS since the start of the pandemic. In Zimbabwe, the Zimbabwe Statistical Agency (ZIMSTAT) (2012:8) revealed that 1,6 million children have lost one or both parents due to HIV/AIDS. Such children are called OVC.

Research has shown that OVC encounter challenges of varied complexity such as psychosocial distress, lack of food, shelter, clothing or health care (Munyati, Chandiwana & Pakuromunhu, 2008:12; Muchenje, 2008:9). Another challenge encountered by OVC relates to caring of terminally-ill adults or siblings and this normally forces OVC to drop out of school (Chandiwana, 2009:21; Richter, 2004:10). The challenge faced by families to provide support and care to the OVC is exacerbated by the increasing numbers of these children which has severely strained the traditional mechanism of the extended family to adequately support vulnerable children (Jackson, 2002:282; Masuka, Banda, Mabvurira & Frank, 2012:6). The inability of the extended family to cope with the increasing number of OVC calls for governments and communities to come up with new strategies to deal with the OVC problem to avert a humanitarian and developmental crisis. It is against this backdrop that this study was carried out with a view to establishing the role that schools can play in caring for and supporting OVC.

This introductory chapter provides a background to the study where the global, regional and local literature relating to the OVC situation is reviewed highlighting the knowledge gap that the current study attempts to close. Other critical components of the thesis covered in this chapter are the research problem, research questions, objectives, aim of the study, delimitations and assumptions of the study and significance of the study. Definitions of key terms are also given in this chapter. The chapter concludes by outlining the structure of the thesis.

1.2 BACKGROUND TO THE STUDY

The world, particularly developing countries are experiencing a growing number of OVC (Agyarko, Kalache & Kowal, 2000:23). Research has shown that there is a gradual increase in the number of OVC globally. For instance, Seruwagi (2012:18) indicated that in 2005, there were 133 million children globally who had lost one or both parents. In addition, Sebsite, Fekadu and Molalign (2014:298) revealed that there were approximately 145 million children worldwide who had lost at least one parent since the advent of HIV/AIDS. It has also been observed that some parts of the world, for example, Asia, Latin America and the Caribbean experienced a decrease in the number of orphaned and vulnerable children in the 1990s, while the situation was different in sub-Saharan Africa, which saw an increase of OVC by 50% (United Nations Children's Fund, 2006:13). Although literature has shown that there is a decrease in the number of OVC in some parts of the world, the never-ending OVC phenomenon remains a cause for concern around the world; hence, efforts should be made to address this problem.

Research has also shown that sub-Saharan Africa is the hardest hit region in the world in terms of the OVC problem (Moyo, 2010:15). Similarly, the UNAIDS Inter-Agency Task Team on Education (2004:14) revealed that by the end of 2003, about 143 million orphaned children aged 0 to 17 years, lived in sub-Saharan Africa, Asia, Latin America and the Caribbean. A national survey conducted in 17 Sub-Saharan countries revealed that the prevalence of OVC was high in most countries with the highest prevalence rate of 55% recorded in Mali and Niger (Bicego, Rutsten & Johnson, 2003: 47). UNAIDS and WHO (2007:18) also observed that sub-Saharan Africa was impacted severely by HIV/AIDS, which resulted in a high death rate of parents, leaving behind a high orphan population. In addition, UNICEF and WFP (2005:24) indicated that an estimated 12.3 million children out of the global estimate of 15.2 million of children under 18 years of age who were either single or double orphans, were found in sub-Saharan Africa. These figures clearly demonstrate that one of the challenges facing sub-Saharan Africa is the OVC crisis. The increasing number of OVC in the world and the problems associated with this phenomenon need to be addressed. The OVC subject has attracted widespread attention from researchers with a view to finding solutions to this intractable contemporary problem (Chinyoka, 2013; Germann, 2005; Seruwagi, 2012).

OVC encounter varied and complex problems, which need to be addressed in order for them to realise their potential. Seruwagi (2012:45) indicates that the impact of orphanhood and

vulnerability on children negatively affect their material well-being. She further posits that poverty leads to reduced access to education, health facilities and other services. Similarly, Khumalo and Maseatile (2011:19) highlight the following needs as vital for orphaned children:

- Physical and material needs, for instance, food and food security, housing, clothing and proper health care;
- Schooling needs, for example, books, school fees, uniforms, shoes, trip funds and income-generating skills; and
- Emotional needs, for instance, parental attention, guidance, love and care.

Robertson's (2011: 84) study in Zimbabwe revealed that poverty is higher in rural areas than in urban areas. By implication this could mean that there are more OVC in rural areas than in urban areas; hence, the focus of this study is on rural primary schools. Zimbabwe, like many other developing countries particularly in sub-Saharan Africa, is struggling to meet the needs of the growing population of OVC. Chinyoka (2013:84) observed that the number of OVC in Zimbabwe was increasing due to factors such as poverty and poor socio-economic situation of the country. In addition, Munyati *et al.* (2008:15) note that one of the major drivers of vulnerability of children in Zimbabwe is HIV/AIDS. Similarly, UNICEF (2010:18) and Van Brenda (2010:18) posit that poverty contributes heavily to child vulnerability. In the same vein, Asande (2012:2) revealed that poverty in Zimbabwe was exacerbated by economic and political instability, which saw hyperinflation peaking to 1000% in 2007 and negatively affecting people's standard of living and leaving many children vulnerable. The question is: what is the Zimbabwean government doing to cushion vulnerable children from the effects of poverty and HIV/AIDS?

According to the Zimbabwe Statistical Agency (ZIMSTAT) (2012:8), about 1,6 million children in the country have lost one or both parents due to HIV/AIDS. The economic and political challenges Zimbabwe experienced in 2007 and 2008 also rendered many children vulnerable (Robertson, 2011:96). Research has shown that OVC encounter a myriad of challenges such as psychosocial distress, anxiety and emotional disturbance (Nyamukapa, Gregson, Wambe, Mushore, Lopman, Mupamhireyi, Nhongo & Jukes, 2010:990; Francis-Chizoro, 2008: 107; Sebaste *et al.*, 2014:14). In addition, Gilborn, Nyonyitono, Kabumbuli and Jangwe-Wadda (2001:42) and Chipungu and Bent-Goodley (2014:55) observe that OVC experience multiple psychosocial problems, like grief, hopelessness, anxiety, stigmatisation and physical and mental violence. In the context of Zimbabwe, as far back as 1999, the

Nzirasanga Commission (1999:193) stated that there were a large number of children living in difficult circumstances. The report further indicates that some OVC terminated their education early because of domestic responsibilities, such as caring for younger siblings. Against the increasing number of OVC and attendant challenges, the Zimbabwe government drafted two key national policies to address the problem, namely, the National Orphan Care Policy and the National AIDS Policy, which both came into effect in 1999 (Ministry of Health and Child Welfare, 2009:15). Notwithstanding the intention of these policies to address the plight of OVC, it has been observed that many of these children are not well-catered for; hence, the need for more players to complement the government's efforts to tackle the OVC problem. Although several studies have been carried out in Zimbabwe about OVC, for instance, Germann (2005), Masuka *al.*, (2012), and Moyo (2010) to mention but a few, none of these studies focused on the role of schools in addressing the needs of in-school OVC. It is against this backdrop that this study seeks to close this gap by exploring the extent to which rural primary schools in Zimbabwe address the needs of in-school OVC.

1.3 STATEMENT OF THE PROBLEM

Although Zimbabwe has several policies and programmes aimed at addressing the needs of OVC such as the National Orphan Care Policy, National AIDS Policy, National Plan of Action for OVC, and the Basic Education Assistance Module (BEAM) to mention but a few, research has shown that OVC continue to experience challenges such as lack of food, clothing, stigmatisation and discrimination (Ganga & Chinyoka, 2010:16; German, 2005:201; Masuka *et al.*, 2012:7; Moyo, 2010:84). The increasing number of OVC presents challenges to the government as it fails to mobilise adequate resources to cater for them. According to the Ministry of Health and Child Welfare (2009:12), the National Plan of Action for Orphaned and Vulnerable Children managed to assist only 33,197 OVC in 2009, a figure which translates to 30% of the targeted group. This is worrying because the Convention on the Rights of the Child (1989: 2), to which Zimbabwe is a signatory, urges member states to observe the rights of the child including OVC. In addition, the Nzirasanga Commission (1999:193) urged the Zimbabwean government to attend to the plight of OVC to improve their well-being. Against these developments, the Zimbabwean government adopted a multi-sectoral approach in dealing with the challenges confronting OVC. Research on the OVC situation in Zimbabwe revealed that OVC in rural areas confront multifarious vulnerabilities than their urban counter parts due to higher levels of poverty in these areas (Robertson, 2011:7; Ganga and Chinyoka, 2010:146). Nzirasanga (1999:177) report on education and training in Zimbabwe also revealed that

30.45% of rural pupils were poor compared to only 5% in urban areas. The findings of previous research noted above motivated the researcher to focus on rural primary schools with a view to establish how they respond to the needs of in-school OVC. To bring the research problem more sharply into focus, it is framed in question form below.

1.4 THE MAIN RESEARCH QUESTION

The major research question of the current study was stated as follows:

To what extent are rural primary schools in Zimbabwe responsive to the needs of in-school OVC?

1.4.1 Sub-questions

To address the main research question adequately and guide the study, the sub-questions are posed below:

- Are the rural primary schools adequately equipped to address the material needs of in-school OVC?
- How prepared are rural primary schools to address the psychosocial problems of OVC?
- To what extent are teachers competent to deal with the OVC?
- What structures are in place in rural primary schools to address the needs of OVC?
- How can rural primary schools be empowered to meet the needs of OVC?

1.5 AIM OF THE STUDY

Mouton (2001:188) emphasises that research aims put the reader in the proper context of the study. Thus, the aim of this study was to explore the responsiveness of rural primary schools in Zimbabwe to the needs of in-school OVC with a view to recommending strategies that can empower schools to adequately address their needs.

1.6 SIGNIFICANCE OF THE STUDY

This study is intended to benefit in-school OVC, schools, the government as the policy-maker and other stakeholders. OVC will benefit from this study in that the recommendations emanating from the study may motivate the government to implement intervention strategies aimed at addressing the plight of these children. This is because the results from this study are

likely to expose the challenges faced by the Zimbabwean rural primary schools in attempting to address the needs of OVC. It is also anticipated that the study would motivate the government to facilitate the training of school-counsellors in colleges and universities and conduct training workshops for teachers already in the field on how to handle OVC. It is also anticipated that the findings of the study will motivate the Non-governmental Organisations (NGOs) and other stakeholders to resuscitate school-based OVC programmes like the school feeding scheme. Bronfenbrenner (1979:23) observed that the environment in which children live plays a critical role in ensuring that children's basic needs are met. In the context of this study, Bronfenbrenner's views are likely to enlighten different stakeholders such as the family, schools, government and NGOs on their role in the ecological model of caring for and supporting OVC. Lastly, this research is likely to bring forth some new insights that may motivate other researchers to investigate the challenges of OVC in other districts.

1.7 RESEARCH METHODS

This section covers the research methodology, methods and sampling techniques adopted in this study.

1.7.1 Research Design

McMillan and Schumacher (2010:63) view a research design as a plan of the investigation used to collect data to address the research questions. Similarly, Hancock, Windridge and Ockleford (2009:28) add that the goal of a research design is to address the research question. This study adopted phenomenological and case study research designs. The researcher employed the phenomenological research design to select 15 in-schools OVC while a case study design was applied to select three principals and six school counsellors.

According to Christen, Johnson and Turner (2011:54), the primary aim of a phenomenological study is to explicate the meaning, structure and essence of the lived experiences of a person or a group of people around a specific phenomenon. For Hancock, Windridge and Ockleford (2009:28), the goal of phenomenological research is to develop explanations of social phenomenon. Based on Lester's (1999) observation that phenomenological research is powerful for understanding subjective experiences, the researcher considered this design to be the best for this study since it allowed the researcher to interact with in-school OVC in their natural environment. The researcher interacted with in-school OVC through focus group discussions conducted at respective schools. Simon and Goes (2011:13) call this immersion,

where the researcher engages the participants in their natural world. The goal of phenomenological research is to describe the meaning that actors attach to their experiences (Christen, Johnson & Turner 2011:54). In this study, this was achieved by giving the OVC an opportunity to describe their experiences, as they perceived them during focus group discussions. School principals and school-counsellors were interviewed on the situation of in-school OVC. This triangulation of participants was done to improve the depth and quality of data collected (Yin, 2009:18).

1.7.2 Data-Gathering Methods

The research adopted a qualitative research approach. Qualitative research is any type of research that produces findings not arrived at by statistical procedures or other means of quantification (Strauss & Corbin, 2011:11). In line with this perspective, the researcher used data collection instruments such as semi-structured interviews, focus group discussions and document analysis. Interviews with the principals and school counsellors and focus group discussions with OVC were conducted until issues around the well-being of in-school OVC were exhausted.

1.7.3 Population, Sample and Sampling Methods

Chiromo (2006:17) defines population as the entire number of individual 'units' objects or events that will be considered in a study. Ary, Jacobs, Razavieh and Sorensen (2010:272) view a research population as a pool or group of people from which the research sample is drawn. The population for this study comprised 70 OVC from the three sampled schools, three principals and six school counsellors to make up a target population of 79. From this population, a sample of 24 participants was purposively drawn comprising 15 OVC, three principals and six school counsellors.

Creswell (2008:56) states that determining an adequate sample size in qualitative research is a matter of using one's own judgment and experience in evaluating the quality of information collected against the use to which it is to be put. Mason (2002:35) emphasises small, purposively-selected samples based on salient criteria. The researcher considered a sample of 24 participants adequate to study it in-depth and glean the lived experiences of in-school OVC. Yin (2009:21) indicates that the objective of qualitative research is far more important in the study than big sample size. In this study, the objective was to gain thick descriptions of the well-being of in-school OVC.

Table 1.1: Study sample

Research group	Target population	Sample	%
OVC	70	15	21.4
Principals	3	3	100
School counsellors	6	6	100
Total	79	24	

1.7.4 Data Analysis and Interpretation

Mouton (2005:108) posits that data analysis entails breaking up manageable themes, patterns, trends and relationships. In this regard, information is organised into categories and themes through coding to reduce information in a way that would facilitate interpretation of findings (Lauer, 2006:48). In this study, data collected through in-depth interviews and focus group discussions were analysed, and similar topics were grouped into categories and coded using Tesch's (2013:95) model of data analysis. The model involves scrutinizing the data collected to identify themes. Interview and document analysis data were perused, categorised and coded.

1.7.5 Data Interpretation

Data interpretation involves explaining the findings by relating them to the existing framework and organising patterns in a logical way (Mouton, 2005:172). In addition, Steal and Struwig (2001:172) maintain that data interpretation gives meaning to raw data. After data was analysed qualitatively applying Tesch's open coding system, themes emerged and data coded and finally interpreted.

1.7.6 Ethical Considerations

Litchman (2010:53) argues, "Ethics means doing what is right, treating people fairly and not hurting anyone". Similarly, McMillan and Schumacher (2010:117) assert that ethics are concerned with the beliefs about what is right or wrong from a moral perspective. In this study, research ethics were observed in the sense that before the empirical research commenced the researcher sought permission to conduct the study from the Permanent Secretary for the Ministry of Primary and Secondary Education, which was granted. The researcher also applied for ethical clearance from the College of Education at the University of South Africa, and only started data collection after receiving ethical clearance certificate. Other ethical issues observed

by the researcher include informed consent; confidentiality, anonymity, and protection from harm and deception (see 4.12.1).

1.8 TRUSTWORTHINESS OF QUALITATIVE DATA

Qualitative researchers identified four measures of trustworthiness, namely, credibility, transferability, dependability and confirmability (Anney, 2014:272; Tobin & Begley, 2004:392). According to Schwendt, Lincoln and Guba (2007:34), these measures ensure the rigour of qualitative findings. The following subsections focus on the measures of trustworthiness.

1.8.1 Credibility as a Measure of Trustworthiness

Credibility refers to the confidence that can be placed in the truth of the research findings (Holloway & Wheeler, 2002:85; Macnee & McCabe, 2008:54). There are several credibility strategies a qualitative researcher can adopt to ensure rigour of the inquiry such as prolonged engagement, triangulation, peer debriefing, selection of context, participants and approach to gathering data (Anney, 2014:273; Cohen et al, 2011:243). In this study, credibility of qualitative data was ensured through triangulation, peer debriefing and selection of context, participants and data-gathering instruments.

1.8.2 Transferability as a Measure of Trustworthiness

Transferability is one of the measures of trustworthiness of the qualitative research process. It refers to the degree to which a qualitative study can be replicated to other contexts with different respondents (Anney, 2014:278; Bitsch, 2005:83). A thick description enables judgement about how the research context fits other contexts (Li, 2004: 305). In this study, the researcher provides thick description of the research process to facilitate peer examination.

1.8.3 Dependability as a Measure of Trustworthiness

Dependability is another criterion of trustworthiness of qualitative data (Ary et al., 2010:115; Cohen et al., 2011:423). Dependability means the extent to which research findings can be replicated in the same context with same participants (Bitsch, 2005: 86). Dependability is

established through a number of strategies which include audit trails, coding, recoding and triangulation (Ary et al., 2010:116).

1.8.4 Confirmability as a Measure of Trustworthiness

Confirmability refers to the degree to which the results of an inquiry could be confirmed by other researchers (Anney et al., 2016: 278). Confirmability of data is achieved through the following strategies: an audit trail, reflexive journal and triangulation (Bowen, 2009: 307). In this study, the researcher triangulated the results from the various data collection instruments and participants as a way of facilitating confirmability and ensuring trustworthiness of data.

1.9 IMPORTANT DEFINITIONS

This section defines of key terms used in this study.

1.9.1 Need

Beatty (2010:5) defines, the concept need as “the measurable discrepancy that exists between a present state of affairs and a desired state of affairs”. It is viewed as a circumstance in which something is necessary. Maslow (1954) identified seven categories of basic needs common to all people (Huitt, 2007:71). In this study, three categories of needs namely physiological, safety and love were explored in relation to OVC well-being. According to Maslow (1954), individuals must meet the basic needs for survival such as the physiological requirements for food, water and shelter. In the context of educational institutions, some schools implement feeding schemes to help students meet their physiological needs.

1.9.2 Vulnerability

Blaikie, Cannon, Davis and Wisner (1994:10) define vulnerability as “characteristics of a person or group in terms of their capacity to anticipate, cope with, resist and recover from the impact of natural hazards”. In addition, Seruwagi (2012:16) views vulnerability as a state of being in a risky situation, where a person is likely to suffer significant physical, emotional or mental harm. In this study, vulnerability shall mean the state of susceptibility of OVC to harm from exposure to stresses associated with their lived experiences.

1.9.3 Vulnerable child

A vulnerable child is a child who has no or has very restricted access to basic needs (Skinner, Tsheko, Mtero, Segwabe, Chibatamoto, Mfecane, Chandiwana, Nkomo, Tlou& Chitiyo,

2004:10).Skinner et al.(2004:10) further elaborate on family situations that make a child vulnerable as follows:

- Caregivers not able to care for children;
- Alcoholic, poor and emotionally disturbed parents;
- Overcrowded household;
- Abusive parents or caregivers;
- Lack of functional resources; and
- Lack of parental guidance.

In addition, Moyo (2010:28) views vulnerability of children as caused by several factors which include, inter-alia, extreme poverty, abuse, neglect exclusion and discrimination by society.

1.9.4 Child

A child in this study shall refer to any person below the age of 18 years (Government of Zimbabwe, 2004:6).

1.9.5 Orphan

An orphan is a child under 18 years of age who has lost one or both parents (Seruwagi, 2012:16).

1.9.6 Material Problems

Material problems refer to problems which include lack of food, clothing, health care, shelter and education (Skinner et al, 2006:620).

1.9.7 Emotional Problems

In this study, emotional problems refer to problems which include lack of caring, love, support, space to grieve and containment of emotions (Skinner et al, 2006:620).

1.9.8 Social Problems

Social problems refer to challenges faced by OVC such as lack of a supportive peer group, role models to follow and guidance in difficulties(Skinner et al.2006:621).

1.9.9 Caretaker/Caregiver

Skinner *et al.* (2004:13) view a caretaker or a caregiver as a person who plays the caretaking role for the OVC. A caretaker or a caregiver is expected to provide all aspects of care and be responsible for the children under his/ her care. Skinner *et al.* (2004:13) outlined the role of a caretaker as follows:

- Someone who provides for the rights of the child as enshrined in the Constitution. A caretaker can also be an older child who heads a household with outside assistance;
- someone who provides psychosocial development and support moral, cultural and religious instructions as well as basic hygiene;
- Someone who takes responsibility; if anything happens to a child, he/she must be there to attend to it.

1.9.10 Counselling

Felthman and Dryden (1993:5) define counselling as a principled relationship characterised by the application of one or more psychological theories and a recognised set of communication skills, modified by experience, intuition and other interpersonal factors, to clients' intimate concerns, problems or aspiration. This definition appeals more to the western culture, thus a definition of counselling in the African context is given as well. Makonde (1980:15) views counselling in the African context as hinged on the perpetuation and creation of the extended family atmosphere leading to relieving of feelings of loneliness and helplessness. He further opines that counselling in Africa also use strategies such as African poetry, music, dance as well as religious therapy.

1.9.11 Poverty

Chinyoka (2013:16) defines poverty as the inability to afford a defined basket of consumption in terms of food and non-food materials which are necessary to sustain life. On the other hand, European Bank for Reconstruction and Development (EBRD) (1998:6) view poverty as lack of multiple resources leading to physical deprivation. In this study, poverty refers to a lack of basic necessities.

1.9.12 Community

Rifkin, Muller and Bichamann (1988:932) view a community as a group of people living in the same area and sharing the same basic values and interests.

1.9.13 Responsiveness

Responsiveness is the ability to react purposefully and within an appropriate time-scale to the needs of customers (Matthias, 2005:603). In this study, responsiveness refers to the capacity of schools to address the needs of in-school OVC.

1.10 DELIMITATIONS OF THE STUDY

Delimitations refer to the characteristics that limit the scope and define the boundaries of the study (Simon & Goes, 2011:12). The aim of this study was to explore the preparedness of rural primary schools in Masvingo, Zimbabwe to the needs of in-school OVC. The study therefore focused on in-school OVC in Grade 7 at the three sampled schools. Only OVC in Grade 7 were selected because of their long stay in the primary school education system and were deemed knowledgeable about the challenges confronted by in-school OVC. School counsellors and principals were also part of the sample of this study as they were considered more informed about OVC issues by the virtue of the fact that they interact with OVC more often than other teachers. The challenges confronting out-of-school OVC were not covered as they were considered out of scope of the current study. Data collection methods and analysis employed were purely qualitative which afforded the researcher the opportunity to study the OVC in their natural world.

1.11 ASSUMPTIONS OF THE STUDY

Simon and Goes (2011:11) view assumptions of the study as “things that are somewhat out of the researcher’s control, but if they disappear the study would become irrelevant”. Leedy and Ormrod (2010:62) add that “assumptions are so basic that without them the research problem itself could not exist”. This study was based on the following assumptions:

- OVC is a contemporary worldwide problem.
- There are OVC in primary schools that need assistance to realise their full potential.
- Schools can be empowered to respond to the needs of in-school OVC adequately.
- Participants will cooperate with the researcher.
- School-feeding schemes can improve the well-being of in-school OVC.

1.12 MOTIVATION TO UNDERTAKE THE STUDY

The motivation to undertake a study on the welfare of in-school OVC was prompted by the challenges I experienced in caring and supporting my late brothers' children as well as my teaching experience in rural schools. I qualified as a secondary school teacher in 1989 and was deployed at a rural secondary school in Masvingo district, Zimbabwe. After one year in the service my two brothers passed on, one year after the other. This was a turning point in my life; it meant more responsibilities looking after the children left behind on top of my nuclear family. Their surviving mothers worked hard but as peasant farmers their efforts at times could not bear fruits because of drought and would look up to me to provide them with basic needs. I tried my best but could not cater for all the children because the load was almost intolerable. Because of that, some of the children did not go beyond primary level of education and this haunts me to this day, although there was nothing I could do. In my 17 years of teaching experience, I was at a rural secondary school and had the opportunity to be in the School Development Committee (SDC) which oversees development in the school. One of the duties of the SDC is to monitor payment of school fees hence would often come to school to send away fee-defaulters. I realised that most of the fee-defaulters we were dealing with were OVC. They could spend a week away when sent away by the SDC. I also observed that the academic performance of these learners was compromised. It is against this background that I developed an interest in carrying out an empirical study in this area with a view to recommending strategies that can improve the situation of in-school OVC.

1.13 STRUCTURE OF THE THESIS

This thesis is made up of six chapters which are summarised in this section as outlined below:

Chapter 1: Introduction and Background: This first chapter introduces the research problem by presenting background to the problem to situate the study in context. The chapter also covers the statement of the problem, research questions, objectives, delimitations, assumptions and significance of the study. The last part of the chapter covers definition of key terms, structure of the thesis as well as chapter summary.

Chapter 2: The plight of OVC in Zimbabwe: The chapter reviews related literature on OVC in Zimbabwe. The Neo-Marxist theories of Coleman and Bourdieu which inform this research are also covered in this chapter. The literature reviewed covers the following areas; drivers of

vulnerability, challenges faced by OVC, OVC caring systems, policies aimed at improving the welfare of OVC as well as programmes implemented in Zimbabwe to assist OVC.

Chapter 3: The OVC Challenges, Interventions and Discourse: This chapter focuses on this chapter.

Chapter 4: Research Design and Methodology: This chapter addresses the research methodology adopted, namely the qualitative approach. The discussion in this chapter focuses on the following sub-headings: the research paradigm, research design, population, sample, sampling techniques and instrumentation. Data collection, analysis, validity, reliability and ethical considerations were also covered in this chapter.

Chapter 5: Data presentation, Analysis and Discussions: In this chapter data are presented, analysed and discussed international literature on the plight of OVC. Through a review of international literature, the global picture of the OVC problem is highlighted. Regional and international conventions and declarations on children including OVC are also presented in this chapter. The chapter also covers child care theories for instance Bronfenbrenner's ecological theory, rupture and resilience theories. The role of the school as a micro-society in addressing the needs of OVC also comes under the spotlight. Data are presented and analysed qualitatively applying Tesch's open coding model. The chapter closes by presenting strategies to empower primary schools to deal with challenges confronting in-school OVC holistically.

Chapter 6: Summary, Conclusions and Recommendations: This last chapter of the thesis presents a summary of literature review, findings of the study and draws conclusions to answer the research questions. The chapter also makes recommendations based on the findings to address the needs of OVC. Limitations of the study, a model for improving the well-being of in-school OVC and recommendations for further study are also presented.

1.14 CHAPTER SUMMARY

In this chapter, I provided the introduction and background to the study as well as the statement of the problem. The first part of chapter 1 placed the research problem in context. The key issues highlighted in the background and statement of the problem include the international and regional policies on OVC such as the Convention on the Rights of the Child (UNCRC) (1989) and the United Nations General Assembly Special Session (UNGASS) (2001). The Zimbabwean government's commitment to observe children's rights as provided for in the global policies was demonstrated by the implementation of local policies aimed at improving

the welfare of OVC, notably the Orphan Care Policy, HIV/AIDS Policy and the Plan of Action for OVC. The unprecedented number of OVC that slip through the social protection nets and the weakening of the traditional care system for OVC were indicated as a justification for exploring the role of schools in addressing the needs of in-school OVC. The chapter also outlined the research questions, objectives, assumptions, delimitations, definition of key terms and significance of the study. The next chapter reviews the literature on the OVC situation in Zimbabwe as well as the theoretical framework undergirding the study.

CHAPTER 2

THE PLIGHT OF ORPHANED AND VULNERABLE CHILDREN IN ZIMBABWE

2.1 INTRODUCTION

Chapter 1 being an introductory chapter covers background to the study, statement of the problem, research sub-questions, methodology adopted as well as the study sample and data analysis. A brief literature review was also given to provide a context of the research problem. Chapter 2 focuses on the literature relating to the situation of OVC in Zimbabwe. Literature review is critical in research in that it helps the researcher to establish what has been done on the topic to avoid duplication of other people's research. Through a literature review, the researcher can also discover research strategies and specific data collection approaches that have not been productive in topics similar to the one under investigation. Interpretation of research results can also be facilitated by literature reviewed when findings are compared with findings from previous studies. The literature reviewed in this chapter is confined to Zimbabwe in order to give a better understanding of the OVC situation in the country. The Neo-Marxist theory which undergirds the study is also explored in this chapter.

2.2 THEORETICAL FRAMEWORK

This study is anchored in Coleman's (1988) and Bourdieu's (1986) social capital theories. Coleman's (1988) and Bourdieu's (1986) theories of social capital are related but belong to different sociological perspectives (Rogosic & Branovic, 2016:81). Bourdieu is a Neo-Marxist hence his theory is rooted in the conflict perspective while Coleman's theory is rooted in structural functionalism (Haralambos & Holborn, 2010: 625; Giddens & Sutton, 2013:415). The section below focuses on the tenets of the social capital theory as opined by Coleman (1988) and Bourdieu (1986) and relates them to the situation of in-school OVC.

2.2.1 Coleman's Theory on Social Background and Educational Attainment

Coleman was an American sociologist who conducted research on one of the key issues of his time, namely differential academic performance of children from different social origins (Hurn, 1993:132; Wang, 2008:119). Most educators in America then, thought differential educational performance between children from different social origins was due to two factors: quality of schools, and the ability or motivation of students (Hurn, 1993:133; Schaefer, 2010:123). Coleman's (1996) study on equality of educational opportunity revealed that there was no

relationship between school quality and student achievement; instead, the research found that, it was family background that made the difference. Coleman (1988:98) posited that family background is an important factor in determining achievement in school. He divided family background into three categories, namely, financial capital, human capital and social capital (Coleman, 1988:115). The components of family background identified by Coleman are explained and linked to the circumstances of OVC in the following subsections.

2.2.1.1 Coleman's social capital theory

According to Coleman (1986:98), social capital is a social structure that determines the activity of an individual in a structured context. For Coleman (1988: 95), social capital is complex; it encompasses relationships and linkages between individuals in social institutions like the family. Coleman's social capital theory borrowed heavily from the theory of rational choice (Rogosic & Baranovic, 2016:82). The theory of rational choice views social capital as a promoter of individual action that results in social mobility (Coleman & Fararo, 1992:41). This implies that individuals enter in relationships with others expecting to benefit from such investments.

According to Coleman (1988:114), social capital is productive in that it facilitates the achievement of certain goals which may be impossible to achieve in its absence. Coleman (1988:100) opines that social capital resides in the structure of relationships between actions and among actions. Social capital is viewed as a resource for people (Coleman, 1988:110). Coleman and his followers operationalised the concept social capital by highlighting that social capital in the family relates to the quality of family relations and family structure as well as social capital of the community which refers to the quality of relationships between members of the community. For Coleman (1993:10), social capital encompasses a network of relationships of all the individuals who are members of a part of society such as the school. With regard to the social capital in the school, Schaefer-McDaniel (2004:15) posits that it encompasses relationships between all subjects in the school context. He further opines that the power of the social capital of the school is related to how closed the network is.

2.2.1.2 Social capital in the family

According to Coleman (1988:109), family background is a major factor that affects achievement in schools. He further observed that there is no single family background, but that family background comprises three components: financial capital, human capital and social capital (Coleman, 1988:112).

2.2.1.2.1 Financial capital

Financial capital refers to the family's wealth (Coleman, 1988:14). He adds that financial capital provides the physical resources that facilitate achievement in education. Some facilities that are catered for by the financial capital include a fixed place in the home for studying, materials to aid learning and financial resources to address family problems (Coleman, 1988:98; Hurn, 1993:135). Bourdieu (1986:243) adds financial capital ensures that physical materials that facilitate academic performance are procured for example study rooms and textbooks as well as empowering families to address nutritional needs of children under their care. The financial capital of OVC is critical in this study, and is explored in the context of education.

2.2.1.2.2 Human capital

According to Coleman (1988:99), human capital is measured by the parents' education but, if the human capital of parents (education) is not turned into social capital, namely, time parents spent engaged with children in educational matters, it will be of no benefit to the child. Coleman (1988:108) concludes that human capital of parents such as the level of education if not transformed into social capital in form of relationships in the family cannot benefit the child's educational opportunities. In addition Coleman (1988:110) opines that human capital of parents does not benefit children easily but entails parents seeking and creating opportunities to connect with schools and teachers. For example, when parents help their children to do homework and attend school meetings, the human capital of parents will benefit the child. In view of these observations, parents should be role models in terms of educational aspirations of children. In addition Coleman (1988: 115) opines that structural deficiency (lack of parental attention to children) compromises the utility of human capital as children may not benefit from it due to lack of sound social relationships between parents and children. In this study, the education of OVC is examined in the light of the influence of human capital on educational attainment.

2.2.1.2.3 Social capital and educational attainment

Social capital has two categories, namely, family and outside the family capital (Coleman, 1988:97). This section explores the two types of social capital and how they influence the educational opportunities of learners including OVC.

Social capital in the family and education

Coleman (1988:96) asserts that social capital relates to the care and attention parents give to their children. He elaborated that parents' social capital encompasses parents attending school meetings, checking children's homework and their expectations for children's education (Coleman, 1988:100). The physical absence of adults, a situation called 'structural deficiency', impacts negatively on the education of a child (Giddens, 2009:643; Schaefer, 2010:52). Structural deficiency is one of the challenges encountered by OVC (Seruwagi, 2012:85). According to Farganis (2011:249), structural deficiency in contemporary society is characterised mainly by single parent and child-headed families. Although single-parent and child-headed phenomena are presented as structural deficiencies, this may be more applicable in western societies than in the African context where traditional mechanisms of childcare, like the extended family, absorb the OVC (Seruwagi, 2013:68). However, in some instances, the physical presence of adults does not benefit children particularly if there is no strong bond between parents and children. (Haralambos, Holborn & Heald, 2010:625). The importance of social capital to the education of a child, particularly the negative impact of structural deficiency is crucial in this study, since some vulnerable children are orphans who experience consequences of structural deficiency. Against this backdrop, the role of teachers in loco parentis will come under the spotlight in the current study.

- **Social capital outside the family**

Social capital outside the family has also been observed to be critical to the educational attainment of a child (Rogosic & Baranovic, 2016:83). Social capital outside the family refers to social relationships that exist among parents as well as relationships with institutions in the community (Coleman, 1988:119). Research has shown that the educational achievement of learners is related to various forms of capital that individuals possess or do not possess (Coleman 1988:96; 1982:73; Doolen, 2009:55; Sullivan, 2001:16). For example, Pishghadam, Noghami and Zabili's (2011) study in Iran revealed that learners who have more access to the different forms of capital achieve higher levels in education. Thus, Acar (2011:23) observes that closely knit families and communities provide a conducive learning environment to the

children in form of well-resourced schools that stimulate them to succeed. The question that begs an answer in this study is: how accessible are the different forms of capital to the in-school OVC to support their educational success?

2.2.1.3 Limitations of Coleman's social capital theory

Coleman's concept of social capital was criticised on the grounds that it is tautological and circular that is, it views social capital as existing if it brings out benefits to the community (Rogosic & Baranovic, 2016: 87). This criticism is not novel since Coleman's social capital theory is rooted in the functionalist perspective which has also been criticised on the same grounds (Giddens & Sutton, 2013:56; Haralambos & Holborn, 2010:516). Durlauf (1999:4) adds that Coleman's social capital theory fails to make a distinction between causes and consequences. Tautology in Coleman's theory was also noted in his failure to distinguish between the individual's desire to enter into relationships with members of the family or community and the challenges they encounter in securing such relationships (Portes, 1998:18). Similarly, Schucksmith (2000:210) rejects Coleman's view that social capital is easily accessible, arguing that such a view conceals inherent social inequalities, as possession of resources depends on the social and cultural capital individuals already possess. Notwithstanding the criticism of Coleman's social theory, research confirmed that social capital facilitates life chances (Dika, 2003:32; Harper & Griffin, 2011:23). Thus, the researcher deemed the theory relevant to anchor this study.

2.2.2 Bourdieu's Concept of Social Capital

Social capital encompasses the resources the family or community commands and relationships among members in a particular community (Bourdieu, 1986:242). Members of the family or community can use the social capital to advance themselves in different spheres of life such as education and employment (Bourdieu, 1986:241).

According to Bourdieu (1986: 240) different social capitals are influenced and shaped by the economic capital. This view is in tandem with Karl Marx' deterministic theory which stipulates that economic factors determine an individual's life chances (Giddens and Sutton, 2013:540). Thus Bourdieu (1990:62) observes that an individual's life opportunities such as access to education are largely determined by external factors such as socio- economic status. He argues that possession and access to capital is unevenly distributed in society. To Bourdieu (198:2400) those who own and control economic forces use their economic power to pass on their

privileges to their sons and daughters thereby maintaining the status quo (Bourdieu, 1990:62). Bourdieu's theory is more pessimistic than that of Coleman where he emphasises that the power of an individual and his actions are conditioned by the social factors and that social capital serves to transfer cultural and economic capital from generation to generation to preserve the existing order (Rogosic & Baranovic, 2016:90). In his social capital theory, Bourdieu (1990:63) included the concepts of 'field', a kind of game theory where "social fields are places where people struggle for position and play to win" (Social Theory rewired, 2016:n.p.), and 'habitus' which refers to "the physical embodiment of cultural capital" of "the deeply ingrained habits, skills, and dispositions that we possess due to our life experiences" (ibid.). The concepts habitus and field provide an explanation of both social class position and the life opportunities associated with different social classes (Bourdieu, 1986:242). In view of Bourdieu's conceptualisation of the concepts habitus and field, the question this research seeks to answer is: do the in-school OVC share the same habitus with non-OVC?

2.2.3 Differences Between Bourdieu and Coleman's Conceptualisation of Social Capital

There are some differences between Bourdieu and Coleman understanding of the concept social capital explores in this section. Coleman (1988:250) views social capital as a concept that encompasses the strength and quality of networks in the family and beyond while Bourdieu (1986:70) views the concept as referring to all the resources controlled by the family and groups beyond the family. To Bourdieu (1986:71), social capital encompasses the totality of resources that stem from belonging to groups beyond the family. In addition, Bourdieu views the level of parental education as an aspect of cultural capital; on the other hand, Coleman views it as a measure of human capital of the family (Rogosic & Baranovic, 2016:88).

Another difference between Bourdieu and Coleman's concepts of social capital is that Bourdieu does not include social relationships of members in organisations such as schools (Bourdieu & Passeron, 1990:54). To Bourdieu (1986:65), the individual's networks of acquaintances should be strong enough to support achievement of set goals. According to Bourdieu (1986:68), social institutions like schools and colleges are used by the economically powerful groups in society to advance their interests such as offering their children highly valued knowledge. Thus, Bourdieu focuses more on the socio-economic status and cultural capital of an individual in the attainment of educational goals than on social capital as suggested by Coleman (Rogosic and Baranovic 2016:89). On this basis, Bourdieu's theory is more plausible than Coleman's in that research has revealed that economic capital is positively

related to educational achievement (Fernandez-Kelly & Haller, 2009:8; Lekhetho, 2013:388). Thus, scholars who follow Bourdieu's approach claim that differences in possession of social capital by individuals are due to differences in the possession of economic capital (Bruen, 2014:56; Doolen, 2009:243).

Although there are some differences between Bourdieu and Coleman's social capital theories, some authors like Ho (2003:45), advocate for an integrated approach. Bourdieu and Coleman's concepts of social capital theory can be integrated as they involve complementary definitions of social capital (Rogosic & Baranovic, 2016: 89). To Burt (1997:143) and Lin (2001:85), the integrated approach helps to overcome the limitations of both Coleman and Bourdieu's models. For example, Tiery's (2006) study of the social capital of an organisation and its efficiency combined the two. The social capital of an organisation was viewed through Coleman's concept of social capital of an organisation where all the internal relationships and common norms and values were examined in relation to the efficiency of the organisation (Tiery, 2006:54). Relationships beyond the organisation not related to norms and values of the group were also studied and related to an individual's achievement in the organisation (Rogosic & Baranovic, 2016:90). The current study adopts an integrated approach where Coleman and Bourdieu's concepts are applied to study the social capital of rural primary schools and their influence on the welfare of in-school OVC.

2.3 THE CONCEPTS 'ORPHAN' AND 'VULNERABILITY'

It is important to make a distinction between the concepts orphan and vulnerability from the onset since the two concepts are of key importance in this study. Poverty is another concept that is crucial in this study; hence, it shall also be defined.

2.3.1 The Concept 'Orphan'

Jackson (2002:267) defines the concept orphan as, "a child who is less than 15 years of age who has lost a mother (maternal orphan), a father (paternal orphan) or both parents (double orphan)". However, for Deters and Bajaj (2008:9), an orphan refers to, "a child under the age of 18 who has lost one or both parents". Grassly and Timaeus (2003:2) add that the word orphan is derived from the Greek word '*orphanos*' meaning without parents. Although the given definitions differ in terms of the age limit of an orphan, there is congruency on the status of an orphan, who is viewed as a child who has lost one or both parents. Orphans are different from other vulnerable children in that they have lost a parent and most are grieving (Boler & Carroll,

2003:35). Seruwagi (2012:42) notes that orphanhood is one of the drivers of vulnerability of children. It is, however, important to note that vulnerability does not mean orphanhood only. In the context of Zimbabwe, the majority of children are orphans (UNICEF, 2008:1).

2.3.2 The Concept ‘Vulnerability’

Vulnerability means the degree of exposure to factors that threaten one’s well-being (Garutsa, 2011:23). Vulnerable children are those who belong to high-risk groups and lack access to basic social amenities or facilities (Deters & Bajaj, 2008:10). Deters and Bajaj (2008:11) further elaborate that vulnerability encompasses neglect, abuse, unregistered births, malnutrition, poverty and precarious family situations. In the same vein, the International Federation of Red Cross and Red Crescent Societies (IFRC) (2007:12) postulates that children are defined as vulnerable if they experience things such as withdrawal from school, discrimination, stigma, loss of property and inheritance rights. Seruwagi (2012:65) observes that vulnerability is widespread for OVC and ranges from a lack of basic material necessities, reduced access to education, health and other services. It is noted that there is a plethora of factors that contribute to the vulnerability of children. Addressing vulnerability of OVC, therefore, requires a proper understanding of causes of their marginalisation. It is, therefore, one of the aims of this study to identify various categories of vulnerable children and recommend strategies to assist them.

2.4 DRIVERS OF CHILD VULNERABILITY IN ZIMBABWE

There are many factors that contribute to child vulnerability in Zimbabwe, chief among them being HIV/AIDS and poverty. These factors will be explored in detail in the following subsections.

2.4.1 HIV/AIDS and Vulnerability of Children

HIV/AIDS is one of the drivers of vulnerability of children (Jackson, 2002:276; Tsodzo, 2007:47). Munyati, et al. (2008:15) purport that in the case of Zimbabwe, the AIDS pandemic is a national tragedy that has resulted in thousands of children orphaned or heavily affected by the impact of AIDS on their families and communities. According to the Ministry of Labour and Social Services (1998:11), the HIV/AIDS epidemic remains one of the largest drivers of widespread poverty. It also highlighted that one of the most devastating effects of HIV/AIDS epidemic in Zimbabwe is the large number of orphans. The Zimbabwe Statistical Agency (ZIMSTAT) (2012:8) revealed that a quarter of all children in Zimbabwe, approximately 1.6

million, have lost one or both parents due to HIV/AIDS. Breadwinners have died because of HIV/AIDS, leaving behind grandparents (generation gap households) who are too old to work, and orphans who are too young to work or care for their siblings (MoLSS, 2009:12; Tsodzo, 2007:20).

Although the HIV/AIDS prevalence in Zimbabwe has been on the decline, reaching 15% in 2014 (Ministry of Health and Child Welfare [MoHCW], 2014:7), Zimbabwe is still experiencing the severe consequences of the epidemic, because it has affected the country's economy by killing the economically active population and leaving many children destitute (Masuka, et al., 2012:7; Munyati, et al., 2008:15). The negative consequences of HIV/AIDS on the lives of children in Zimbabwe have been highlighted in many research studies, like those by Munyati, et al. (2008) and Garutsa (2007), to mention but a few. It is well-established that Zimbabwe is at the epicentre of HIV/AIDS pandemic with one of the highest HIV rates in the world (Felsman, 2011:2). There is, therefore, a need to address the emotional burdens and psychological needs of young people who are contending with loss and sorrow on a daily basis. The role of schools is therefore explored in the context of addressing the material, emotional and psychological needs of OVC.

2.4.2 Poverty and Vulnerability of Children

Poverty is one of the factors that cause child vulnerability in Zimbabwe (UNICEF, 2010:8). Van Breda (2010:8) asserts that parents are incapacitated to care and support children under their care due to factors such as political upheavals which normally leads to economic problems. Zimbabwe is experiencing economic challenges compounded by the impact of HIV/AIDS, leading households into a downward spiral of poverty (Felsman, 2011:2; MoLSS, 2009:11). Poverty in Zimbabwe was also worsened by political instability and the targeted sanctions in the 2000s that led to economic hardships in the country (Asante, 2012:2). Reasons for the ruin of one of Africa's most prosperous economies were among other things fiscal indiscipline, civil unrest and an unstable political environment. In 2006, hyperinflation reached 1000% and this saw many households living below the poverty line (Asante, 2012:12).

The level of poverty in Zimbabwe contributed significantly to the collapse of social protection system as well as other social services delivery systems (MoLSS, 2009:11; Tsodzo, 2007:50). It has been observed that, about 48% of the population in Zimbabwe lives below the poverty datum line, that is they do not get adequate food to meet the basic standard of living (ZIMSTAT, 2012:12; MoLSS, 2009:11). Foster and

Williamson (2000:65) indicate that the situation of OVC is worsened by the high incidence of poverty in their communities as well as poor infrastructure and service delivery system. This is the situation existing in most rural areas in Zimbabwe. Children living in poor families have been found to experience challenges such as lack of food, shelter and other basic services (National AIDS Council [NAC], 2010:15). Van Breda (2010:2) adds that poverty affects all children but the hardest hit groups are orphans. In Zimbabwe, poverty in families and communities is the major driver of child vulnerability manifested in a lack of access to social services such as education, health and shelter (Munyati et al., 2008:16; Muronda, 2009:35; Masuka et al., 2012:6).

2.5 CHALLENGES ENCOUNTERED BY OVC

OVC encounter a myriad of challenges. The death or incapacity of parents makes children vulnerable and predisposes them to physical and psychological risks over which they have no control (Foster & Williamson 2000:65; Seruwagi 2012:34). According to the Government of Zimbabwe (GoZ) (2010:2), the combination of poverty, neglect and violence contributes to the large number of children on the move, resulting in unsafe migration and child exploitation. The challenges OVC encounter in Zimbabwe are multifaceted; they include, inter-alia, economic deprivation, psychosocial problems, stigmatisation and discrimination. The subsections that follow examine each of these challenges in detail.

2.5.1 Economic Challenges Faced by OVC

Studies on OVC have shown that they encounter problems such as lack of material resources (Germann, 2005:70; Munyati et al., 2008:12; Muronda, 2009:43). OVC are at risk of lacking fundamental necessities like adequate clothing, particularly warm and protective clothing (Jackson, 2002:276). The situation of OVC is exacerbated by prolonged illness of parents which impacts negatively on the household income. A study by David, Nkululeko, Mfecane, Skinner and Ratale (2006:5) indicates that problems encountered by OVC commence before the death of a parent, as the household's ability to provide care and support is undermined by medical expenses. When households are steadily sucked dry of funds, the living standards and quality of life of all household members are dragged down (Germann, 2005:71).

Research has shown that OVC confront a myriad of challenges for instance lack of food, shelter and emotional support (Germann, 2005:71; Munyati, et al., 2008:12). A research conducted by Nyamukapa, Foster and Gregson (2008) on orphans' household circumstances in Zimbabwe,

revealed that OVC encounter material difficulties relating to access to food, school fees, soap, blankets, clothes and shoes. Although a sizeable number of studies have revealed that OVC are disadvantaged compared to non-OVC in terms of provision of material support, research conducted in Zimbabwe by Mishra, Vinod and Bignami (2008:10) found little evidence that OVC are disadvantaged in health, nutritional status and healthcare compared to non-OVC. The well-being of OVC and non-OVC are compared in this study to establish the situation obtaining in Masvingo district. Economic challenges experienced by OVC compel them to engage in activities like gold panning which leads them to drop out of school, thereby perpetuating the vicious cycle of poverty (Masuka et al., 2012:8). Chase, Wood and Aggleton (2004:14) observed that early marriage was prevalent among OVC in Zimbabwe, as they viewed it as a way of alleviating problems. Studies on the situation of OVC in Zimbabwe revealed that they face multiple vulnerabilities which include separation of children in child-headed households when they are parceled out to relatives for care (Masuka et al., 2012; Munyati, Rusakaniko and Mupamhireyi, 2006; Muronda, 2009). In Zimbabwe, OVC's standard of living is deteriorating despite policies put in place to protect them (Garutsa, 2011:20). In the case of Zimbabwe, it has been noted that there is a disjuncture between policy and implementation, and this has been attributed to poor economic environment (Shumba & Moyo, 2014:145). The basic rights of OVC are violated as many are dropping out of school, have hardly enough to eat, and have no access to health services and decent shelter (Barnett & Whiteside, 2002:202). The multiple challenges faced by OVC have led the Government of Zimbabwe to put in place policies to address their plight. The effectiveness of policies to address the challenges encountered by OVC are examined in this study, in order to explore the role of schools within the framework of related policies.

2.5.2 Psychosocial Challenges Faced by OVC

OVC suffer from several psychosocial problems (Masuka et al., 2012:8). The psychosocial problems confronted by OVC include grief, loss of identity, dealing with shame, stigma, abandonment as well as rejection (Germann, 2005:232; Muronda, 2009:56). The death of a parent leads children to experience depression, behavioural problems and reduced self-esteem and self-confidence (Seruwagi, 2012:65). A study by Nyamukapa et al. (2003) on orphans' household circumstances, conducted in Zimbabwe, found that, loss of parents has detrimental effects on a child's education because of the great psychological distress it causes. Germann (2005:233) argues that stigmatisation experienced by OVC contributes to delinquent behaviour. Stigmatisation of OVC is fuelled by the misconception that children whose parents

die of HIV/AIDS or are living with HIV/AIDS are also HIV-positive (Jackson, 2002:274). Jackson (2002:274) adds that stigma associated with OVC arises when these children are discriminated against at school or in the community. OVC may be denied access to school as well as being shunned or called derogatory names, thereby, impacting negatively on the development of their self-concept (Giddens, 2009:520; Schaefer, 2010:58). Children develop self-esteem when people around them provide them with positive encouragement and feedback, and when they are given ample opportunity to develop skills in various areas of human functioning (Haralambos & Holborn, 2010:621). Support for children's psychological well-being is, therefore, a key investment in human capital that should not be ignored since it underpins other processes for the development and stability of societies (Giddens, 2009:516). A school as an agent of socialisation is invaluable in identifying and providing psychosocial support to help mitigate the negative emotional impact that parental illness or death can have on OVC (Germann, 2005:232).

2.5.3 Stigma and Discrimination in the Context of OVC Well-Being

Stigma and discrimination are some of the major challenges encountered by OVC (Seruwagi, 2012:115; Masuka et al., 2012:11). Gumede (2009:23) states that children whose parents are presumed to have died of HIV/AIDS-related diseases are often thought to be HIV-positive, and are consequently stigmatised and discriminated against. A study conducted in Zimbabwe by Chase, Wood and Aggleton (2004:6) revealed that OVC were laughed at by others and taunted about the death of their parents or poverty that they faced. The study also indicated that OVC narrated episodes of physical, verbal and sexual abuse perpetrated by extended family members who cared for them. In the same vein, Ngonyana (2013:36) highlighted that OVC are traumatised when they are separated from their siblings to be cared for by extended family members. The level of trauma OVC experience when they are taken in by extended family members was also reported in a study conducted in Uganda, where 44% of the sampled OVC indicated that they felt sad about the separation, while 17% said it made them feel isolated (UNICEF, 2003:31). Several studies, for example, Munyati *et al.* (2006); Muronda (2009) and Van Breda (2010) found that OVC often suffer from low self-esteem, depression and anxiety, which often drive OVC into drug abuse and other anti-social behaviour. It is apparent from the research findings that OVC are a delicate group who need emotional, material and psychological support, and schools can be helpful in this regard.

2.5.4 Child-headed Families and the Situation of OVC

The advent of HIV/AIDS has seen an increase in the number of child-headed families (Francis-Chizororo, 2008:84). A child-headed family is a family headed by a person under the age of 18 (Van Breda, 2010:2). This type of family is a result of deaths of parents mainly due to HIV/AIDS and the failure of the extended family to absorb the ever-increasing number of OVC (Masaka, et al., 2012:7; Muchenje, 2008:15). Van Breda (2010:4) points out that one of the challenges of child-headed families is the vulnerability of young children who assume adult responsibilities. There are many factors that force children to end up in child-headed households. In some cases, children prefer to stay on their own out of fear of being mistreated and exploited by foster parents (Munyati et al, 2006:54). Whatever reasons culminate in children heading families, the fact is that when children take up adult responsibilities, their rights are violated. Gumede (2009:21) avers that when the health of an HIV-infected parent begins to deteriorate, the basic needs of the child may be seriously compromised, as the parent may become unemployed due to poor health. In such a situation, the child would be forced to take care of the ill parent; a situation called role reversal (Ngonyana, 2013:12). A study conducted in Zimbabwe by Muchenje (2008) revealed that children are forced to take up adult responsibilities because there is no one to look after them. Muchenje (2008:9) further indicates that children in child-headed families encounter a myriad of problems that include, inter-alia, dropping out of school, inadequate food resources and abuse in the form of property-grabbing by relatives who are expected to look after them. A study by Germann (2005) in Zimbabwe on OVC circumstances revealed that children's roles were changing in response to the problems created by HIV/AIDS. Research has shown that children as young as 12 years old head households and look after young siblings and terminally-ill parents (Munyati,et al., 2008:12; Germann, 2005:104). Commenting on the situation of children in Zimbabwe, Richter (2004:10) points out that the number of children cared for by teenagers has increased over the past years. Although there are problems faced by children in child-headed families, such households have been noted to have more advantages over institutional care particularly in Africa. Tolfree (2003, cited in Van Breda, 2010:5) outlined the disadvantages of institutional care in the context of Africa, as follows:

- The segregation, discrimination and isolation that children often experience;
- Admission into children's homes is often based on the needs of parents not on the interests of children;

- Lack of personal care and stimulation;
- Lack of opportunities to learn about the roles of adults;
- High risk of institutional abuse;
- Lack of attention to specific psychological needs; and
- Institutionalised children often experience problems in adjusting to life outside of the institution.

According to Van Breda (2010:4), literature relating to Africa supports the placement of OVC within the extended family. In situations where institutional care of OVC is not popular, there should be alternative strategies to care for the disadvantaged children, and it is in this context that the role of schools is examined.

2.6 EDUCATIONAL DISADVANTAGES OF OVC IN ZIMBABWE

Addressing the educational rights and needs of OVC in Zimbabwe presents challenges. The increasing number of OVC due to HIV/AIDS presents problems in addressing their educational needs which are further compounded by the global financial crisis (UNICEF, 2009:8). The fact that most OVC live in poorly-resourced households puts them at a disadvantage compared to children from rich families (Haralambos et al., 2010:621; Schaefer, 2010:25). A study by Chase, Wood and Aggleton (2004) on OVC in Zimbabwe found that a significant number of OVC were not attending school for various reasons such as lack of school fees and money to buy books and uniforms. The study also highlighted that girls dropped out of school to take up caring responsibilities. Muchenje (2008:5) indicated that OVC in Zimbabwe live under difficult conditions as they are looked after by grandparents and widows with no reliable sources of income. It has been observed that in some situations, OVC were traumatised and victimised by their caregivers to the extent of refusing to attend school. Research conducted by Munyati et al. (2006) to determine challenges faced by OVC in Chimanimani and Mangwe districts, found that a third of the households sampled had children who were not going to school. Half of the households in the two districts reported that their children had inadequate school uniforms. Munyati, et al. (2006:17) observed that being inadequately clothed or not having school uniforms singles out children as OVC and has a bearing on stigmatisation in the community in general and in school in particular. Shumba and Moyo (2014:145) conducted a study on the counselling support OVC receive in schools in Harare Metropolitan. The participants comprised 13 purposively-selected students and four school counsellors. The study found that OVC were not getting adequate counselling due to negative attitudes towards

counselling by teachers and lack of proper planning of counselling in the schools. The study recommended support and empowerment of school counsellors to deliver effective counselling services to the OVC. The question one may pose is: Is the situation in Zimbabwean rural schools better than that in Harare Metropolitan? This topic is explored with a view to recommending strategies that rural primary schools can implement to address the psychosocial needs of OVC.

2.7 PARENTAL INVOLVEMENT IN CHILDREN'S EDUCATION

Parental involvement in the form of financial and material support impacts on educational aspirations of children (Vander Zalm, 2010:26). Children who are provided with adequate material such as uniforms, books, and food perform better than children who lack basic provisions (Giddens, 2013:685; Haralambos & Holborn, 2010:545). Vaidya (2005:6) avers that establishing links with the home at all levels of schooling is important. She adds that when parents support the work of the school and get involved in its activities, students make greater progress. Parents can participate in school activities such as consultation days or parents-teachers' meetings to mention but a few. Research suggests that parenting is the most important factor associated with educational achievement for children and also determines achievement in later life (Seruwagi, 2012:42). Pagliarulo (2004:34) asserts that parental involvement is correlated to student achievement, lower dropout rates and positive attitudes towards learning. Considering the importance of parental involvement in the education of children, it can be appreciated that schools and teachers, in particular, act in loco-parentis; that is, they should take the role of parents in caring for learners. Shaw (2010:9) outlines the importance of developing school-family partnerships as follows:

- They improve school programmes and school climate.
- They help students succeed in school and later life.
- They connect families with others in the school and help teachers with their work.

In Zimbabwe, the participation of parents in education is covered in the Statutory Instrument [SI] 1 of 2000, which provides for establishment of SDCs to oversee development in schools (GoZ, 2000:13). The influence of parental involvement in the education of their children has been an area of interest to scholars like Bourdieu. Bourdieu (2001:98) alludes to the power of the effective relationship between a parent and a child by pointing out that the best hidden and socially most significant educational investment is the transmission of cultural capital. When

parents understand and support school programmes, they convince their children of the need to learn and take schooling seriously (Vander Zalm, 2010:38). Parental involvement in education has been noted as more important in determining a child's education than poverty, school environment and the influence of peers (Seruwagi, 2012:44). In view of the important role of parents in the education of children highlighted above, I contend that the education of OVC is impacted negatively by lack of parental guidance since most OVC are not living with their biological parents.

2.8 CARE AND SUPPORT STRUCTURES FOR OVC IN ZIMBABWE

Caring for children is of vital importance to the Government of Zimbabwe. There is a six-tier safety net system in Zimbabwe concerned with caring for children in line with the United Nations Convention on the Rights of the Child and the traditions of the Zimbabwean society (Muronda, 2009:77). The six-tier system comprises the nuclear family, extended family, community care, foster care, adoption and institutional care (Masuka al., 2012:6; Muronda, 2009:77). Each component of the six-tier safety mechanism is examined below.

2.8.1 The Nuclear Family

The nuclear family is a key institution in society in that it is a building block of society (Giddens, 2009:320; Schaefer 2010:62). With regard to the care of children, every child has a right to remain in his or her biological nuclear family for protection and care (GoZ, 2013). When the nuclear family fails to take care of children because of challenges such as death of parents or poverty, the extended family is expected to take over the caring responsibility (Masuka et al., 2012:6). However, in Zimbabwe, the extended family is overstretched by the increasing number of OVC (Munyati et al., 2006:55), and as such the intervention of institutions like schools in caring for OVC can be helpful in dealing with the OVC problem.

2.8.2 Kinship Care

Kinship care is a component of the six-tier safety net system in Zimbabwe. In Zimbabwe and other African countries, when biological parents die, the extended family is encouraged to take up the caring and protection of orphans. The extended family can also contribute when surviving parents are incapacitated by illness or poverty (MoLSS, 2008:8). The role of the extended family in caring and protecting OVC has, however, been undermined by the HIV/AIDS epidemic (Masuka et al., 2012:6). Jackson (2002:282) indicates that the traditional

safety net is becoming saturated, overwhelmed and weakened by a combination of three factors stated below:

- An increase in OVC prevalence;
- A reduction in the number of prime-age caregivers; and
- The unraveling of the safety net as a result of social change.

In the same vein, studies by Muronda (2009:78) and Masuka et al. (2012:6) revealed that the extended family has been overstretched by the HIV/AIDS epidemic and it is becoming less able to contribute to the well-being of OVC. The inability of the traditional safety system like the extended family to handle the skyrocketing population of OVC necessitates the intervention of other institutions like schools in caring for OVC. In this regard, I contend that schools should be empowered to handle challenges faced by in-school OVC.

2.8.3 Institutional Care

The Zimbabwe orphan care policy emphasises on community care of OVC and recommends institutionalisation as a last resort (MoLSS, 2005:11; Muronda, 2009:122). The traditional safety net system has the advantage that children grow up with a sense of belonging and identity compared to those who grow up in institutions (Jackson, 2002:285; Masuka et al., 2012:5). Institutional care is a safety system provided by institutions for the maintenance of disabled, homeless and delinquent children (Muronda, 2009:61; Germann, 2005:232). In Zimbabwe, institutional care is provided by the government through the Department of Social Services (DSS), NGOs and religious groups (Jackson, 2002:284; Masuka et al., 2012:5;). For instance, Church of Christ in Zimbabwe is running two children's homes in Chiredzi town, while the Salvation Army is running Masiye Camp in Bulawayo (Jackson, 2002:275). Supervision of services offered to OVC by institutions is done by the Ministry of Labour and Social Services (MLSS) (Garutsa, 2011:64; Muronda 2009:61). There are some advantages for children raised in well-resourced institutions. Children in residential care benefit materially and tend to have greater access to education. These children are normally well-dressed, well-fed, healthy and well-catered for in terms of education (Jackson 2002:286). Research has, however, shown that residential care is fraught with problems, which include, inter-alia, provision of poor services due to shortage of staff to supervise services offered and alienation of children from their families, communities and culture (UNICEF & GoZ, 2010:13; Masuka, 2012:6; Muronda 2009:111). In addition, Jackson (2002:285) observes that residential care is associated with

risks which include loss of cultural knowledge and identity such as totem, local customs and traditions. It can be concluded from the literature covered thus far that institutional care is not a panacea to the problem of caring for OVC; instead, community-based care in which schools participate is more popular, particularly in Africa.

2.8.4 Child Adoption

Dlembeu (2010:15) define child adoption as a permanent arrangement whereby adoptive parents and the adopted child acquire the same rights, duties and privileges towards each other as if the child had been their biological child. In Zimbabwe, adoption is guided by the *Children's Protection and Adoption Act Chapter 5:06* (GoZ, 1996:8). Adoption of children involves the issuing of an adoption order by the Juvenile Court. Probation officers from the DSS act as the guardian of the child involved (Masuka et al., 2012:4; *Children's Act Chapter 5:06*). The probation officer's duty in the adoption process is to safeguard the interests of the child (*Children's Act Chapter 5:06*). Although adoption can go a long way in addressing the burden of caring for OVC, the practice is not popular in Africa (Jackson, 2002:283; Powell, 2006:42). Research has shown that in many African countries, taboos about adoption pose a barrier to effective care in the community (Seruwagi 2012:82; Jackson, 2002:278). It has been noted that many African individuals and couples who are childless are unwilling to adopt children because of fears that caring for an alien will anger ancestral spirits (Jackson, 2002:284; Masuka et al., 2012:5). However, in Zimbabwe, some families, particularly those with a strong religious faith are willing to adopt young children (Garutsa, 2011: 45), and with the growing popularity of Christianity in Zimbabwe, it is envisaged that more OVC will be adopted as traditional beliefs relating to adoption are challenged by Christianity.

2.8.5 Community Care of OVC

Community care of children is normally adopted in the event of failure by the nuclear and extended families to care for children. In such situations, the community will appoint an adult to assume the role of a guardian for the children (Muronda, 2009:78; Garutsa, 2011:52). Community care ensures that children are cared for in their community and supported through programmes such as the chief's granary (*Zunde raMambo*) (Jackson, 2002:282). In Zimbabwe, the chief's granary is administered by chiefs. Local chiefs are given pieces of land that is cultivated communally and produce is distributed to the needy (Jackson, 2002:279; Masuka, 2012:4). As observed by Muronda (2009:79), the chief's granary faces viability challenges such as shortage of fertilizer, seed and other farming inputs. The researcher has also observed that

the Zimbabwe land reform programme of 2000 (Moyana, 2002:68) impacted negatively on the chief's granary scheme as the mass movement of people to new resettlement areas depleted the labour force that used to work in the communally-owned pieces of land.

2.9 LEGISLATION FOR THE PROTECTION OF OVC IN ZIMBABWE

Zimbabwe has a legal framework that supports children (Masuka et al., 2012:3; Muronda, 2009:58). *The Constitution of Zimbabwe (2013) Amendment No20*, Section 19, deals with children's issues relevant to the OVC. Under this section, the state is obliged to adopt policies and measures to ensure that in matters relating to children, the best interests of the children concerned are paramount (*Constitution of Zimbabwe 2013 Amendment, No 20*). The Constitution also obligates the state to adopt policies and measures to ensure that children:

- enjoy family or parental care or appropriate care when removed from the family environment;
- have shelter and basic nutrition, health care and social services;
- are protected from malnutrition, neglect or any form of abuses; and
- have access to appropriate education and training (*Constitution of Zimbabwe Amendment No.20, Act 2013*).

It is interesting to note that the Constitution of Zimbabwe as the supreme law of the land captures issues that relate to children's welfare in detail yet a substantial number of OVC are not well-catered for. This may mean that the institutions charged with the responsibility of implementing policies are not doing so effectively, hence they require periodic evaluation. There are other laws pertinent to the welfare of children besides the Constitution; these include the *Children's Act Chapter 5:06*, the *Guardianship of Minors' Act Chapter 5:08* and the *Birth and Death Registration Act* (Masuka et al., 2012:3). The following section focuses on the provisions of the aforementioned acts with a view to conceptualise how they relate to the welfare of OVC.

2.9.1 The Children's Act (Chapter 5:06)

The Children's Act (*Chapter 5:06*) formally known as *Children's Protection and Adoption Act*, is one of the most comprehensive statutes governing the rights of abused and neglected children who need protection (Garutsa, 2011:59; Masuka et al., 2012:3). The Act describes categories of children who need care, for instance, those who are destitute or have been abandoned, and those whose parents or guardians give them up in settlement of disputes or cultural beliefs

(*Children's Act Chapter 5:06: Part III*). The Act covers or protects the interests and rights of disadvantaged children; hence it is quite relevant to the OVC, so that if fully implemented, the lives of the OVC can be improved. Commenting on the effectiveness of child-related legislation in Zimbabwe, Garutsa (2011:59) points out that there are anomalies between policy and practice that most policies have not been implemented to date and that one of the factors militating against full implementation of these policies is a lack of financial resources. Failure by the government to implement policies relating to OVC points to the suffering of this group of children and indicates that more players such as schools should intervene to support OVC particularly those in school.

2.9.2 Guardianship of Minors Act (Chapter 5:08)

The *Guardianship of Minors Act of Zimbabwe (Chapter 5:08)* was enacted in 1997 and deals with issues of custody of children whose parents separate or divorce (*Guardianship of Minors' Act Chapter 5:08*; Garutsa, 2011:59). The Act outlines the “best interest of the child” as the basis for making decisions affecting children (*Guardianship of Minors' Act Chapter 5:08*). This Act is quite relevant to this study as some children become vulnerable due to divorce and those that provide care and support to OVC need to be guided by such acts in order to assist these children adequately. The next section addresses policies promulgated by the Government of Zimbabwe aiming at improving the welfare of children.

2.10 POLICIES SUPPORTING CHILDREN IN ZIMBABWE

Zimbabwe has two key national policies that support children in general, that is, the Zimbabwe National Orphan Care Policy and the Zimbabwe National AIDS Policy, both adopted in 1999. According to MOHCW (2011:22), these policies were developed through a broad-based consultation, reflecting Zimbabwe's strengths and traditions on collaboration between the government and civil society.

2.10.1 The Zimbabwe National Orphan Care Policy and the Welfare of OVC

The Zimbabwe National Orphan Care Policy was adopted in 1999 in response to the legislation which was not orphan-specific and failure by many OVC to access the protection of the law (Munyati, et al., 2006:6). The Zimbabwe National Orphan Care Policy was meant to guide government and other intervention agencies in mobilising resources to ensure that OVC get at least minimal basic services (Masuka et al., 2012:3; Munyati et al., 2006:6). According to Garutsa (2011:60), the Zimbabwe National Orphan Care Policy is anchored in the principle of

the best interest of the child and is alluded to in Article 3 of the Convention on the Rights of the Child [UNCRC]. The policy has six-tier safety mechanism of care through which a child in need can be catered for, namely the nuclear family, extended family, community care, foster care, adoption and institutional care (MoLSS, 1999:25). The policy identifies opportunities to provide care and support for vulnerable children based on the country's laws, the cultural tradition of caring and the collaboration approach between the government and civic society (Masuka et al., 2011:3; Munyati et al., 2006:6).

The Zimbabwe National Orphan Care Policy provides for the establishment of Child Welfare Forum at every level, starting from the village to the national level (MoLSS, 2000:4). The policy also recognises the traditional leaders' role in the care of OVC and supports their programmes such as the *Zunde raMambo* and *Dura raMambo* (Garutsa, 2011:61; MoHCW, 2011:17). The participation of traditional leaders through programmes such as *Zunde raMambo* ensures that the elderly who care for the OVC and child-headed families are supported within their communities (Masuka et al., 2012:4; MoLSS, 2000:8). The strategies to assist OVC provided for by the Orphan Care Policy are good if fully implemented.

2.10.2 The Zimbabwe National HIV/AIDS Strategic Plan and the OVC Problem

The Zimbabwe government responded to the crisis of HIV/AIDS and the growing population of OVC by adopting a National AIDS Policy in 1999 (GOZ, 1999:11; MOHCW, 2009:8). The policy provided for a compulsory AIDS levy from taxable incomes since 1999, to raise money meant to alleviate the suffering of people living with AIDS and their dependents, especially the OVC (Munyati et al., 2006:6). The Zimbabwe National AIDS Policy empowers employers to deduct 3% from taxable income of employees and channel to the NAC which administers the funds (GoZ, 1999:14). Although policies such as the one on HIV/AIDS have been put in place, the plight of OVC continues to be a serious issue that requires the involvement of all public institutions including schools.

2.10.3 The Effectiveness of the National Action Plan (NAP) for OVC in Addressing the Needs of OVC

The NAP for OVC was set up to deal with the increasing number of orphans and vulnerable children due to the rising poverty and increased death rate caused by HIV/AIDS (Garutsa, 2011:62; Masuka et al., 2012:5). Gandure (2009:45) maintains that the Government of Zimbabwe responded to the financial challenges and poor macro-economic conditions by developing a

frame work of support for OVC, NAP for OVC. The plan seeks to prioritise and address the issues affecting OVC, their families and communities (Masuka et al., 2012:5; NAC, 2011:10).NAP for OVC is implemented in two phases in Zimbabwe, the first phase, NAPI, was implemented between 2004 and 2010, while the second phase, NAPII, was scheduled to be implemented between 2011 and2015 (Masuka, et al., 2012:6, MOHCW, 2011:27; Muronda, 2009:65).

The vision of NAP1 was to reach out to all OVC in Zimbabwe with basic services that would improve their lives (Ministry of Labour and Social Welfare [MLSW],2011:7; Masuka, et al.,2012:5).NAPI for OVC covered seven areas, namely, coordination, children participation, birth registration, formal education, social services, extra-curricular education and livelihood support (Garutsa, 2011:8; NAC, 2011:13).The seven areas would be addressed through efforts by government and civil society. The objectives of NAPI for OVC were inter-alia, to increase access to food, health services, water and sanitation for all OVC by 2005, and to increase education on nutrition, health, hygiene for all OVC by December2005(NAC, 2011:12).

The implementation of NAP1 for OVC was guided by a plethora of objectives which included the following:

- The recognition that children participate in decisions that affect them;
- Gender equity, that is, equal attention paid to girls and boys; and
- Building up on existing community structures, paying attention to family ties and traditional capital (Garutsa, 2011:26; Munyati et al., 2006:20).

An evaluation of NAPI for OVC revealed that activities of intervention agencies were not well-coordinated, resulting in a significant number of OVC not accessing external support (Masuka et al.,2012:6; Muronda, 2009:55; NAC, 2011:8). The limitations of NAPI gave birth to NAPII which was adopted in 2011,and ran from 2011 to 2015 (MoESAC, 2013:16;NAC, 2011:8 ;).NAPII for OVC provides a framework for coordinated action to ensure that OVC and their families in Zimbabwe, access basic services and that all children are protected from abuse (MLSS, 2011:7;NAC, 2011:2). NAPII for OVC targets OVC and their families to improve effectiveness in-service delivery. Another area NAPII for OVC focuses on is the rebuilding of government capacity to deliver social services needed by children and their families (NAC,2011:8;Tsodzo, 2007:9).The objectives of NAPII for OVC address critical areas of the lives of OVC that, if fully implemented, the lives of OVC can improve significantly.

2.10.4 Guiding Principles for NAP II for OVC

The implementation of NAPII for OVC is underpinned by the following principles:

- Children have the capacity, as well as the right to participate in decisions that affect them.
- Children are not a homogenous group and diversity of approaches and instruments need to be adopted in promoting their rights.
- Children are resilient and have great capacity for self-reliance.
- Non-discrimination in the provision of essential services to children.
- The need to promote gender equality or pay equal attention to the roles of boys and girls.
- Effective coordination of human, material and financial resources at all levels to make maximum use of local resources.
- Close collaboration between government, civil society and private sector (Masuka, et al., 2012:5; MLSS, 2011:33).

The mission, goal, objectives and principles of NAP11 for OVC are child-centered so much that if the plan is fully implemented, the needs of OVC can be addressed adequately. In this regard, Masuka et al.(2012:6) remarked that, in terms of legislation and policy framework, Zimbabwe has a basic legislative foundation which could be used as a base to improve child protection. The diagram below shows roles played by different stakeholders in the implementation of NAP11 for OVC.



Figure 2.1: NAP for OVC Institutional Structure

Source: (MLSS, 2011-2015:26)

There are child protection committees at different levels of society that deal with the welfare of children (MLSS, 2011:34). At community level, the child protection committee is chaired by the community leadership with representatives from extension workers, community members, faith-based organisations and children representatives (MLSS, 2011:37). The child protection committee at community level is charged with the responsibility of coordination, implementation and sustainability of NAP for OVC programme as it is closer to the family and children who are the target of the programme (MLSS, 2011:38). One of the duties of the community child protection committee is to identify OVC and implement social protection programmes (MLSS, 2011:37; MOHCW, 2011:16). In view of the important functions of the community child protection committee, it is prudent that schools be represented on such committees if they are to respond to the needs of OVC meaningfully.

2.11 PROGRAMMES TARGETING OVC IN ZIMBABWE

In response to the increasing number of OVC, the Government of Zimbabwe in collaboration with the United Nations agencies and civil society devised a number of social protection programmes to assist OVC (Munyati, *et al.*, 2006:20; Masuka, *et al.*, 2012:3). The programmes targeting OVC are, among others, Institutional Grants, BEAM, Child Adoption and Free Treatment Orders (Masuka *et al.*, 2012:3; MLSS, 2011:24). The question is: to what extent are these programmes implemented? Given the political and economic problems bedeviling the country, most of the programmes targeting OVC have not been implemented, to the detriment of these children.

2.11.1 The Zimbabwe National Strategic Plan for the Education of Girls, Orphans and Other Vulnerable Children 2005-2010 and the Plight of OVC.

The Zimbabwe National Strategic Plan for the Education of Girls, Orphans and Vulnerable Children's aim is to create a society in which girls and women are empowered to take charge of their lives and participate fully in national development and to reach all OVC in Zimbabwe with basic education services that will have positive impact on their lives (MoESAC, 2013:16). The strategic plan of education is guided by the educational goals of NAP for OVC such as the need to increase the new school enrolment of OVC and ensuring their retention in primary and secondary school. To achieve these goals, the strategic plan of education

recommends that, the BEAM selection committee should be guided by the following principles:

- Constantly visit schools rather than communicate from a distance.
- Ensure that BEAM distribution is guided by the number of OVC rather than the enrolment of the school.
- Keep an updated register in the school so that every OVC benefits.

SDCs and principals should be involved in the identification of OVC (Ministry of Education, Sports Arts and Culture [MOESAC], 2013:19). The strategic plan of education considers OVC as a critical aspect of education; hence schools are expected to deal with the issue cautiously.

2.11.2 Basic Education Assistance Module [BEAM] and the Education of OVC

BEAM is one of the five components of the Enhanced Social Protection Project (ESPP) which forms part of the Zimbabwe's wider social protection strategy (Masuka, et al., 2012:3; Muronda, 2009: 33). It aims to reduce the number of OVC dropping out of school due to economic hardships (Ministry of Public Service Labour & Social Welfare [MOPSLSW], 2004:24). BEAM assists vulnerable children with payment of school fees (Garutsa, 2011:61; Masuka, et al., 2012:3; Munyati *et al.*, 2006:20), and this includes children with ill, disabled or single parents or children from very poor families (Masuka et al., 2012:4). BEAM is administered by MOESAC in collaboration with the DSS (MLSS, 2000:8). In schools, BEAM beneficiary children are selected by a committee comprising parents and school authorities (Masuka, et al., 2012:13; MOHCW, 2011:16). Although programmes like BEAM, are noble in as far as protection and care of OVC is concerned, not all OVC are catered for by such programmes. According to UNICEF and Government of Zimbabwe (2010:11), a total of 527,310 primary and 573,245 secondary school children benefited from BEAM in the first half of 2010. The statistics show that there are more children in need of assistance who are not covered by the safety nets, highlighting the need for institutions like schools to initiate school-based programmes targeting OVC. It has also been noted that the BEAM scheme excludes categories of OVC such as children with learning difficulties and those who live far from schools (UNICEF & GOZ, 2010:6). Against this background, it is imperative that schools run school-based projects to cover needy children who may not be covered by national programmes like BEAM.

2.12 THE OVC SITUATION IN ZIMBABWE

Zimbabwe is one of the countries which have been hard hit by the OVC problem (Munyati et al., 2006:6). This section examines some research conducted on OVC by various researchers in order to get a clear picture of the magnitude of the OVC problem in the country.

Muchenje (2008:1) carried out research on the socio-economic challenges faced by the girl-orphans in Zimbabwe, and revealed that OVC live under difficult conditions as most were looked after by grandparents and widows with no reliable source of income. The research also highlighted that girl-orphans were stigmatised and discriminated against on account of wearing shabby clothes. It also emerged from this study that girl-orphans engaged in prostitution, vending and working as domestic workers because of poverty. In the face of such challenges, the dream of pursuing educational programmes is doomed unless schools and other institutions assist in providing OVC with material and emotional support. The question is: Are Zimbabwean primary schools equipped to handle challenges faced by in-school OVC?

In another study, Gutsa (2012:5) researched the role of local government in improving access to education for OVC. The study indicated that there was no proper policy on the implementation of the BEAM in schools. The research also found that most OVC missed out lessons due to late disbursement of BEAM funds, but it did not explore how schools deal with challenges faced by in-school OVC. To fill this gap, the current study focuses on the school-based interventions to address the needs of OVC.

In a study on the problems faced by OVC in Zvimba district of Zimbabwe, Chandiwana (2009:15) indicated that orphans were threatened by factors such as a shortage of material resources such as food, school stationery, clothing, school uniforms and sanitary protection for girls. These material necessities are of primary importance to the well-being of an individual and they should be satisfied if other non-material needs like education are to be met. The current study seeks to explore this subject by examining the role played by Zimbabwean rural primary schools in creating supportive school environments for the OVC. In a related study, Schenk, Michalis, Sapiano and Weiss (2010:21) conducted research in sub-Saharan Africa on care and support of OVC, from 1998 to 2007. They found that, in Zimbabwe, a sizeable number of vulnerable children experience multiple traumatic events such as stigma, rejection in times of need and absence of adults to talk to about their problems (Schenk, et al., 2010:22). Adult support is vital in the psychosocial well-being of children such that if missing, the personality development of the child is affected negatively (Mwamwenda, 2004:114). Against this

backdrop, it is imperative that schools, and teachers in particular, are sensitised to fulfil their in loco-parentis role, especially when dealing with OVC. The study by Schenk et al.(2010) was, however, focused on OVC in general, while the current study focuses on the circumstances of OVC within the primary school context.

2.13 ZIMBABWEAN PRIMARY SCHOOLS' CAPACITY TO MEET THE MATERIAL NEEDS OF IN-SCHOOL OVC

Campbell, Andersen, Mutsikiwa, Madanhire, Skovdal and Gregson (2014:402) conducted a research on children's representations of school support for HIV-affected children in rural Zimbabwe with a sample of 128 school children. The participants were asked to write a story about HIV-affected peers and how the school assisted them in tackling their problems. The study highlighted negative impacts of HIV on the social, physical and mental well-being of peers. The relationships of affected children with fellow learners and teachers were bad. The affected children received limited support, for instance, respondents mentioned one-off acts of material help by teachers towards vulnerable children (Campbell et al., 2014:454). The respondents also depicted the school as a source of bullying, stigma and social exclusion of vulnerable children. The findings of this study challenge the assumption that schools can serve as significant institutions in supporting the well-being of vulnerable children. Schools are, however, considered by international policy makers as possible substitutes for families in the context where HIV/AIDS has disrupted the ability of adults to support children's physical and emotional well-being (Campbell et al., 2014:472). Although some negative practices were reported by the respondents to be happening in schools, some participants mentioned positive things, for instance, the existence of links between schools and external sources of support for the affected children(Campbell et al., 2014:473). Against this background, the researcher contends that with adequate support, schools can handle and deal with challenges confronting in-school OVC. In this regard, Campbell et al.(2014:802) state that schools are intrinsically well placed to substitute for families and to support children in responding to complex and multifaceted physical, emotional and social challenges.

In a study conducted on the causes and consequences of psychological distress among orphans in Eastern Zimbabwe, Nyamukapa et al.,(2010:988) established that orphans experience greater psychological distress than non-orphans. Gender and age were also identified as critical variables in the well-being of vulnerable children (Nyamukapa et al., 2010:989). The study found that older children experienced less psychological distress than younger children while

girls reported more psychological distress than boys. Nyamukapa et al. (2010:990) recommended that schools need significant increase in training, support and additional resources to effectively assist OVC. This study, therefore, seeks to explore the preparedness of rural primary schools in Zimbabwe to assist in-school OVC without discriminating against some of them based on age or gender.

In the spirit of supporting schools, Nyamukapa et al. (2010:992) suggest that a combination of approaches should be adopted that provide incentives for children to attend school and equip schools with tools to support vulnerable children and improve their educational outcomes. In the case of Zimbabwe, there are programmes like the BEAM which assist OVC by paying school fees, but more needs to be done to cover the needs of the growing number of OVC (GoZ, 2011:8). Pufall, Gregson, Eaton, Masoka, Mpandaguta, Louise, Skovdal, Nyamukapa and Campbell (2014:379) explored the success of schools in Zimbabwe in including and supporting the well-being of vulnerable children in rural areas. In this study, 28 primary and 18 secondary schools participated in the study. The study concluded that school quality enhances the well-being of primary school children and revealed the importance of local communities in the children's well-being. Schools were found to serve as points of access for assistance from NGOs and other agencies.

Pufall, Nyamukapa, Eaton, Campbell, Skodval, Munyati, Robertson and Gregson (2014) conducted a study in Manicaland province with a different cultural system from that of Masvingo where the current study is being conducted, this could generate different findings. The link between schools and NGOs has been noted as critical in the well-being of OVC. This subject will be explored in this study, with a view to establish the situation that exists in the Masvingo district.

In another study, Campbell, Andersen, Mutsikiwa, Madanhire, Skodval, Pufall, Nyamukapa and Gregson (2014:30) explored factors influencing the HIV-competence of two rural primary schools in Zimbabwe. The study revealed that HIV-affected children's home challenges impacted negatively on their safety and well-being due to lack of access to basic material needs, heavy responsibilities at home and lack of adult support and care. Thus, Ansell (2008:815) states that, in contexts where the ability of adults to play their traditional role in caring and supporting children is reduced, schools should step in and take on these responsibilities. The study identified three sources of support that HIV-affected children received from the school:

- Support from teachers in the form of materials such as books, uniforms and food;

- Teachers keeping social records of children and referring children in need to external sources of support; and
- Peers offering emotional support, sharing food and school materials.

The study, however, discovered that teacher and peer-support was not offered in a systematic way; for example, teacher support was found to originate from kind individuals rather than from institutionalised school policy (Campbell, et al., 2014:30). The findings of this study may show that there are no formal school-based programmes in Zimbabwean schools to assist OVC, a situation which does not promote the well-being of in-school OVC. Campbell, et al. (2014) focused on the well-being of HIV-affected children only, while the current study widens the net to explore the well-being of OVC in rural primary schools since vulnerability of children is not a result of HIV/AIDS only.

Germann (2005:465) carried out a study on the quality of life of OVC in child-headed households in Bulawayo with a sample of 142 participants drawn from 105 child-headed families. Data was collected over 12 months through interviews and focus group discussions (FGDs). The study found that 69% of the participants were living a medium to satisfactory quality of life and demonstrated high levels of resilience. On vulnerability to abuse, the study found that child-headed members were more vulnerable to external abuse and reported little in their households. It also emerged from the study that sufficient community care capacity enables child-headed families to function. While Germann's (2005) study focused on the quality of life of vulnerable children in an urban set-up and explored the challenges confronted by OVC and coping strategies adopted, the current study focuses on the role of primary schools in addressing the needs of OVC in rural areas. The study examined challenges of child-headed-household members' experience in the community and their homes without referring to education. To fill this gap, the current study explores vulnerability of OVC in the context of primary education.

2.14 CHALLENGES FACED BY OVC IN ACCESSING EDUCATION IN ZIMBABWE

OVC encounter various challenges in accessing education which stem from their poor social backgrounds. Research conducted in Zimbabwe on this subject has shown a bleak picture of the educational opportunities of OVC.

In a study conducted to determine the services offered by Catholic Relief Services (CRS), a non-governmental organisation and its partners to OVC, Fanelli, Mushunje and Ndlovu (2007:8) found that CRS partners supported more than 20,000 OVC through a holistic and integrated set of activities in educational assistance, economic strengthening, food security and psychological support. One of the CRS partners, Mavambo Trust, established peer-counselling programmes in 12 secondary and three primary schools in two suburbs of Harare, to empower children to help each other to address some challenges encountered by OVC in schools. The trust set up Child Care Teams (CCT) at each school, working with a teacher who guides peer counsellors (Fanelli et al., 2007:16). It revealed that the counselling programmes in schools led by CCT were effective in assisting OVC, since the teams met often to discuss problems that stemmed from children's home situations, such as lack of food. This study, therefore, seeks to explore mechanisms in rural primary schools in Masvingo district, targeting OVC, since school-based programmes such as CCT have been found to be effective in responding to the needs of OVC. However, the study recommended that, for child-led groups, such as CCT to be effective, they need training, support and resources (Fanelli et al., 2007:23). The issue of funding school programmes targeting OVC is critical and is explored in this study

In their study of Uzumba Orphan Care programmes, Fanelli et al., (2007:22) observed that the institution implemented school assistance programmes by establishing Education Assistance Committees at each school. One of the responsibilities of the Education Assistance Committee was to select children who should receive assistance. The Education Assistance Committee comprised members of the SDC and children representatives. Fanelli et al., (2007:23) indicate that children are in an ideal position to identify their counterparts who are vulnerable, because, as peers, they are their playmates. It is, therefore, of paramount importance for institutions assisting children to involve children in their programmes.

In another study, Munyati, Rusakaniko and Mupamhireyi (2006) explored the magnitude of OVC in two districts of Zimbabwe, namely Chimanimani and Bulilimangwe, using a vulnerability indicator score with nine indicators which include inter-alia:

- number of meals per day;
- some days OVC go without food;
- adequacy of clothing and school uniform;
- children without caretakers and children without anyone with whom to discuss their problem;

- ability to pay for medical fees; and
- anyone ill in the household in the last month (Munyati, *et al.*, 2007:16).

One of the goals of this study was to identify ways to improve the social conditions, health, development and quality of life of OVC. The study found that nearly a third of the households in Bulilimangwe had children who were not going to school. Over half of the households in the two districts reported that their children had inadequate school uniforms. The study also indicated that 52.6% of child-headed households had no caretakers and a third or 34.2% had no one to discuss problems with (Munyati *et al.*, 2006:53). The study by Munyati *et al.* (2006) indicated that many households were vulnerable mainly due to poverty. The vulnerability indicators such as inadequate school uniform and inability to pay school fees affect in-school OVC negatively so much so that schools have to step in and assist. The study recommended that intervention agencies should prioritise and make provision for clothing and school uniforms for OVC. Munyati *et al.* (2006) recommended that schools should form partnerships with intervention agencies as a way of capacitating them to handle challenges confronting OVC. This study, therefore, seeks to find out what rural primary schools in the Masvingo district are doing to address cross-cutting issues affecting OVC, such as lack of food and clothing. This subject is explored to establish the situation in the Masvingo district.

Chitiyo, Chaigara and Chitiyo (2008) carried out research in the Mberengwa district to determine the effectiveness of providing psychosocial support to children orphaned by HIV/AIDS in improving educational attainment. The study revealed that all 20 orphans in the sample showed signs of emotional need and were lagging behind in academic work. The study, however, did not explore the role of schools in addressing the psychosocial and material needs of OVC. To fill this gap, the current study focuses on the role of schools in addressing the needs of OVC.

In a study to investigate the role of local government in improving OVC's access to education, Gutsa (2012:14) established that there was no proper policy on the implementation of BEAM in schools. The study also revealed that OVC miss lessons due to late disbursement of BEAM funds, which serves to indicate that money allocated to BEAM by the government is not adequate to meet the requirements of the growing number of vulnerable children, hence the need for other players like schools to complement government efforts. This discussion raises the question: Do primary schools in Zimbabwe have the capacity to assist in-school OVC?

2.15 SCHOOLS AS RIGHTS-BASED ORGANISATIONS

Smart, Heard and Kelly (2003:108) state that schools are rights-based institutions which should play a major role in protecting pupils against discrimination. They add that schools have advantages to assist OVC in the following areas:

- Identification of OVC;
- Provision of psychosocial support to all children, especially OVC; and
- Monitoring of the well-being of OVC.

The current study aims to assess the extent to which primary schools fulfil the roles expected of rights-based organisations. The problems that OVC encounter such as lack of food, inadequate school uniform, lack of caretakers as observed by Munyati et al. (2006:21), may serve to show that Zimbabwean schools are far from the standard of rights-based organisations, hence need to be examined with a view to improving their *modus operandi*. Smart et al. (2003:108) add that schools can offer services to OVC such as:

- Delivering a daily meal;
- Providing after-school supervision for those who have no adult supervision;
- Linking children in difficult circumstances to other relevant service providers to meet their specific needs; and
- Enrolling and retaining OVC in educational institutions.

It has also been noted that, schools can be empowered to train teachers and older children to support OVC through provision of food and clothing, especially uniforms (Byenkya, Pillay & Oti, 2008:32; Smart et al., 2003:108). Schools can also collaborate with agencies offering services to children for the benefit of OVC. Schools can do this by:

- Finding out about other organisations in the area that help OVC and their families;
- Keeping contact details of organisations easily accessible to children; and
- Inviting organisations to deliver talks at school, explaining services they offer and how they can be reached.

Schools can also create teacher support teams to support one another and share lessons and experiences to deal with OVC (Byenkya et al., 2008:33; Smart et al., 2003: 119). Byenkya et al. (2008:34) add that a school can serve as a protective shield to help children withstand the multiple vicissitudes that they can expect of a stressful world. In the same vein, Chamba

(2011:19) states that primary schools have two crucial tasks, namely facilitating care and support for affected teachers and pupils, and provision of child-friendly environment for pupils. In essence, the school environment should always be friendly to ensure that all learners acquire maximum knowledge, skills and attitudes necessary for them to fit in society. In view of the aforementioned ways by which schools can assist OVC, it can be concluded that if such programmes were implemented, vulnerability of OVC could be minimised. So, this begs the question: to what extent are rural primary schools in Zimbabwe implementing programmes targeting OVC? This study assesses the sensitivity of rural primary schools in the Masvingo district against an array of school-based programmes that have been identified as OVC-responsive.

2.16 CHAPTER SUMMARY

In this chapter, literature relating to the circumstances of OVC in Zimbabwe was covered. Several areas concerning OVC were treated, inter-alia drivers of vulnerability, challenges confronting OVC, care and support systems for OVC, policies that support OVC as well as programmes Zimbabwe is implementing to support OVC. It emerged from the literature reviewed that OVC encounter a myriad of problems and that the traditional support mechanisms like the extended family are overwhelmed by the number of OVC. Conflict theory of social inequality adopted as a theoretical lens to examine the circumstances of OVC was also covered in this chapter. The next chapter is Chapter 3, which will focus on the challenges confronted by OVC globally and various interventions adopted to assist OVC.

CHAPTER 3

THE DISCOURSE ON OVC CHALLENGES AND INTERVENTIONS

3.1 INTRODUCTION

Chapter 2 covered challenges confronted by OVC in Zimbabwe. A theoretical framework that undergirds the current study, namely the Neo-Marxist theory was explored in the second chapter. The drivers of vulnerability such as poverty, challenges encountered by OVC as well as care and support systems for OVC were also covered. This chapter reviews international literature on OVC. Issues covered in this chapter include the magnitude of OVC in the world; international conventions on the rights of the child; challenges encountered by OVC, such as material deprivation; child care theories, for example, Bronfenbrenner's bio-ecological theory; and the role of education in caring for and supporting OVC. This chapter also reviews international literature in order to get a global perspective on the challenges confronting OVC, and examines policy frameworks and strategies adopted by different countries in addressing the OVC problem. In exploring the strategies adopted to address the needs of OVC, the school and the teacher have been placed at the centre of the discussion to see how they respond to the needs of the OVC.

3.2 THE MAGNITUDE OF THE OVC PROBLEM IN THE WORLD

The OVC problem is one of the contemporary social challenges the world is grappling with currently. The World Vision International (2005:5) indicates that HIV/AIDS has created a human and developmental crisis of unprecedented scale. This observation came against the backdrop that most OVC in the world have been orphaned by HIV/AIDS pandemic (Jackson, 2002:370; Seruwagi, 2012:65). The precise number of OVC in the world cannot be determined due to the diverse ways in which vulnerability is measured across countries. However, approximations based on specific types of vulnerability attest to the magnitude of the problem. In this regard, the United States government and partners (USG) (2009:23) indicate that, globally, 428 million children aged 0-17 live in extreme poverty, 150 million girls have experienced sexual abuse, 2 million children live in institutional care and 2.8 million children engage in various forms of exploitative labour. There has been an increase in the number of OVC since the advent of HIV/AIDS. Zosa-Feranil, Monhan, Kay and Krishna (2010:5) indicated that there were 163 million children living as orphans and of these 17,5 million had lost one or both parents due to HIV/AIDS pandemic. Similarly, Biemba, Beard, Brenham and Flynn (2010:21) indicated that "there were 145 million children worldwide who had lost one

or both parents due to various causes”. In the light of the soaring number of OVC around the world, particularly in developing countries, I argue that the traditional mechanisms of dealing with the OVC problem cannot adequately cater for these children; hence, the need for other institutions like schools to intervene.

Furthermore, Zoll (2011: 6) reported that in sub-Saharan Africa there were 34 million children orphaned by HIV/AIDS and 18, 8 million at risk due to poverty, diseases, gender inequality, famine and regional instability. With regard to the scale of OVC in the Southern Africa Development Community (SADC) region, Martin, Mathambo and Richter (2011:11) indicated that there were 126 million children aged 0-17 years in 2011, and out of these, 17 million (17%) were orphans. In addition, Wood and Goba (2011:281) reported that in Southern and East Africa, Uganda and Tanzania had the highest numbers of OVC, which stood at 6,6million and 6,4 million respectively in 2011. They further observed that Kenya, Cameroon and Zimbabwe’s total number of OVC was slightly above 3 million collectively while Lesotho had the lowest estimated number of 530 000 OVC in the same year. The OVC problem is not confined to Africa; various parts of the world are currently battling with this challenge as well. Zoll (2011:39) indicated that there were 8000 children living in state-run orphanages in Afghanistan. Commenting on the magnitude of OVC in sub-Saharan Africa, which was at 34 million, in 2011, Zoll (2011:14) said, “The daunting numbers of OVC are heart wrenching and overwhelming”. In view of the soaring numbers of OVC across the world, the researcher argues that caring for and supporting these children present challenges to many countries, particularly the developing world. In the same vein, Stover, Bollinger, Walker and Monasch (2006:24) reported that there were 140 million children under the age of 18 years in the developing world who had lost one or both parents by 2006. USAID, UNAIDS and UNICEF (2004:15) indicated that there were 43 million orphaned children representing 12% of all children in sub-Saharan Africa by the end of 2006. USAID, UNAIDS and UNICEF (2004:15) further lamented that the increasing number of OVC presents overwhelming demands on families, community networks, state health and educational systems. It is against this background that the researcher sought to explore how Zimbabwean primary schools respond to the needs of OVC. To put the needs of children and OVC in perspective, international and regional declarations on children’s rights are discussed in the following section.

3.3 INTERNATIONAL AND REGIONAL DECLARATIONS ON THE RIGHTS OF THE CHILD

The issue of children's rights has been on the international agenda since the end of the First World War in 1918 (Moyo, 2010:1). In this section, three declarations and treaties are covered, namely the United Nations Convention on the Rights of the Child (UNCRC) the United Nations General Assembly Special Session on HIV/AIDS (UNGASS) and the African Charter on the Rights and Welfare of the Child (ACRWC) to promote and put the issue of children's rights including OVC in context.

3.3.1 The United Nations Convention on the Rights of the Child

The Convention on the Rights of the Child (UNCRC, 1989) is the universal and foremost legal human rights instrument for children. It covers children's civil, political, economic, social and cultural rights (Zoll, 2011:63; UNICEF, 2009:8; Chinyoka, 2013:92). All countries that signed UNCRC committed themselves to provide universal primary education. UNCRC also obligates signatory countries to promote and encourage international cooperation in matters relating to education (UNCRC, 1989:2). The Convention supports the position that the family unit is the best environment for children to grow (UNCRC, 1989:3). In this study, the researcher selected Articles 2, 28 and 29 of UNCRC for further examination in relation to the welfare of OVC.

3.3.1.1 Article 2: Non-discrimination of children

Article 2 of UNCRC stipulates that no child should be treated unfairly based on race, religion, gender, culture, disability or socio-economic background (UNCRC, 1989). Despite the existence of such a provision, research has shown that schools still discriminate against children from poor backgrounds (Fraser, 2004:12; Luthar, 2006:745; Hlupo & Tsikira, 2012:14). In addition, Chinyoka (2013:106) observes that teachers tend to create self-doubt and sustain it among poor children regarding their treatment and performance by not giving them enough attention and support in the classroom. Similarly, Rosenthal and Jacobson's (1968) famous study, 'Pygmalion in the classroom' done in California, revealed that teachers treated pupils differently based on preconceived assumptions related to the child's social background. Studies on streaming have found that although streaming was supposed to be done on the basis of ability, teachers grouped pupils on the basis of social background (Giddens, 2009; 815; Haralambos, Holborn & Heald, 2010: 635; Hurn, 1993:171). Children from middle class were placed in A-stream while working class children were relegated to the C-stream

(Giddens, 2009:816). To cater for these differences, teachers offered different levels of content to different streams; an A-stream was offered a highly valued curriculum, while a watered-down curriculum was offered to the C-stream. This study, therefore, seeks to find out if OVC are discriminated against and stigmatised in Zimbabwean schools.

3.3.1.2 Article 28 of the Convention on the Rights of the Child

Article 28 of the Convention on the Rights of the Child covers educational issues. It stipulates that “all children have the right to a primary education, which should be free” (UNCRC, 1989:6; UNESCO, 2009:8). The Article emphasises that “young people should be encouraged to reach the highest level of education of which they are capable” (UNCRC, 1989:4). Article 29 of the UNCRC also urges member states to ensure that their educational policies are directed at the holistic development of the child (UNESCO, 2009:9). In the context of UNCRC, education is a fundamental right of all children including OVC. Research has, however, indicated that educational opportunities for OVC are limited compared to non-OVC (Datta, 2009:3; Ganga & Chinyoka, 2010:89; Zheke, 2010:1). Francis-Chizororo’s (2008) study on the formation, constitution and social dynamics of child-headed households in Zimbabwe revealed that OVC were disadvantaged with regard to access to education. Against the backdrop of a plethora of challenges confronted by OVC to access education as highlighted by research, the researcher was motivated to explore the question: to what extent do rural primary schools in Zimbabwe respond to the educational needs of OVC?

3.3.2 The United Nations General Assembly Special Session

The UNGASS Declaration of Commitment on HIV and AIDS reflects commitment to address the challenges confronting OVC (Naidoo, 2010:80; United Nations [UN], 2001:12). Three articles of UNGASS are committed to addressing the plight of OVC, namely Articles 65, 66 and 67, which are discussed in this section.

Article 65 urges governments, families and communities to provide a supportive environment for OVC and to ensure that these children are not denied basic education, food, clothing and psychosocial services (Moyo, 2010:29; UN, 2001:12). The Article also provides for the protection of OVC from all forms of abuse, violence, exploitation, discrimination, trafficking and loss of inheritance.

Article 66 encourages member states to ensure non-discrimination of OVC and equal enjoyment of all human rights through the implementation of a policy of de-stigmatisation.

Lastly, Article 67 is committed to the welfare of OVC in that it encourages the international community, donor community, civil society and the corporate world to support national programmes aimed at addressing the needs of OVC and to direct special assistance to sub-Saharan Africa (Moyo, 2010:29;UN, 2001:12).

3.3.3 The African Charter on the Rights and Welfare of the Child

The Declaration on the Rights and Welfare of the African Child was adopted by the Assembly of Heads of State and government of the then Organisation of African Unity at its 16th Ordinary Session in Monrovia-Liberia in July 1979 (African Charter, 1979). The Charter encourages member states to take appropriate measures to protect the African Child (ACRWC, 1979). The African Charter emphasises on the children's rights as reflected in the provisions discussed below:

Article 3 of the ACRWC emphasises non-discrimination of children. It encourages state parties to ensure that every child is entitled to the enjoyment of the rights and freedoms recognised and granted in the Charter irrespective of the child's, his/her parents or guardians' race, ethnic group, colour or sex (ACRWC, 1979). Article 4 of the Charter covers issues to do with the best interests of the child. It stipulates that in all activities concerning the child undertaken by any person or authority, the best interests of the child shall be the primary consideration. Other provisions of the Charter that are critical to children's rights include Article 5, which covers issues to do with survival and development. Parties to the Charter are urged to ensure survival, protection and development of the child. Equally relevant to the current study, is Article 11, which encourages state parties to ensure that every child is accorded the right to education. In short, the ACRWC and the UNCRC are critical documents in terms of which African State Parties have promulgated a number of legislative policies aimed at improving the well-being of children (Dlembeu & Mayanga, 2006:14). The following section focuses on problems confronted by OVC in different regions of the world.

3.4 CHALLENGES FACED BY OVC

Research has revealed that OVC encounter a myriad of problems (Francis-Chizororo, 2008:107; Germann, 2006:149; Ladas, 2014:109; Tsagaye, 2013:24). The challenges encountered by OVC fall into three categories: material, emotional and social (Tsheko, 2007: 9; Ganga & Chinyoka, 2010: 189; Zoll, 2011:8). With regard to the welfare of children, Article 28 of the UNCRC recognises that children have a wide range of needs such as love, safety,

nutrition and play (UNCRC, 1989; UNICEF, 2009:8). Failure to attend to these needs puts children including OVC in a precarious situation that impacts negatively on their well-being (UNICEF, 2009:8). The challenges encountered by OVC are explored in this section to assist the OVC service providers to recognise and provide assistance that addresses their needs effectively.

3.4.1 Material Disadvantage of OVC in Africa

Research has shown that OVC are at a higher risk of living in households with less food security, missing out on schooling and exposure to HIV/AIDS (Datta, 2009:3; Martin, Mathambo & Richter, 2011:15; Tsagaye, 2013:34). Hunter and Williamson's (1998) study highlighted that the majority of the African population has limited access to proper nutrition. While poverty in African countries negatively affects the majority of the African population, research has revealed that OVC are more vulnerable than non-OVC to malnutrition, due to limited access to food (Datta, 2009:4; Gosh & Kalipeni, 2004:12; Zoll, 2011:8). Some research has indicated that service provision and resources in rural areas lag far behind the urban areas (Gosh & Kalipeni, 2004:11; Martin, Mathambo & Richter, 2011:17; Nitschke, Ihemba & Nekundi, 2007:16). This study seeks to find out the extent to which rural primary schools respond to the needs of in-school OVC. In view of the inequality between the urban and rural areas in terms of services and resources, I assume that the situation of OVC in rural primary schools is deplorable, and needs to be redressed.

Tsheko's (2007) study conducted in Botswana revealed that OVC who were under the care of grandparents had no adequate clothing. Their situation was so bad that one OVC interviewed reported: "We need clothes because our clothes are now worn out and not fitting properly". This view was corroborated by some OVC caregivers who complained that "OVC were not supplied with general clothing, and as a result, some of them were seen in tattered clothes or wearing school uniforms even after school" (Tsheko, 2007:23). Furthermore, Seruwagi's (2012) study in Uganda, and Datta's (2009) study in Kenya affirmed that poverty impacts the ability of OVC to cover costs of items such as uniforms, transport, stationery and school fees. In addition, some research in Lesotho (Lekhetso, 2013), Africa (Salaam, 2004), Zimbabwe (Ganga & Chinyoka 2010; Nziramasanga, 1999) has revealed that poverty impacts negatively on the academic performance of learners. Poverty negatively affects the education of OVC as it compromises the capacity of parents and caregivers to buy books and other teaching-learning materials. My experience as a secondary school teacher for 17 years is that when learners are

confronted with the challenges of this nature, they eventually drop out of the school system. This could be the situation being experienced by OVC in the Zimbabwean primary schools.

Research by Nyangara (2009:6) carried out in Kenya and Tanzania on the effects of programmes supporting OVC recommended that OVC service providers should engage guardians and caregivers in interventions targeting OVC as well as enhancing linkages between OVC caregivers and other support providers such as humanitarian organisations. In view of Nyangara's (2009:6) recommendations, I contend that if schools involve guardians and other stakeholders in school-based programmes targeting OVC, they can improve their well-being significantly.

3.4.2 Material Disadvantage of OVC in Zimbabwe

Zimbabwe is no exception to the challenges experienced by other African countries driven by poverty. Research indicated that living in poverty has negative ramifications on the well-being of children (Campbell et al., 2014:402; Chizororo, 2008:105; Germann, 2006:153; Nyamukapa et al., 2010: 992). In the same vein, Donald, Lazarus and Lolwane (2010:156) and Lacour and Tissington (2011:552) maintain that children living in poverty are more prone to health and safety risks associated with malnutrition and diseases than children who are not so poor. The question is: what is the situation of OVC in Zimbabwean primary schools with regard to their material well-being?

Ganga and Chinyoka's (2010) study on psychological disorders caused by poverty among OVC in Eastern Zimbabwe, reported that OVC encountered the following challenges:

- hunger, stress and exposure to diseases;
- insufficient and indecent clothing and bed linen;
- indecent shelter with leaking roofs;
- insufficient school fees; and
- lack of adequate security.

This could be the situation encountered by OVC in most Zimbabwean rural primary schools. Furthermore, Nziramasanga (1999:177) highlighted that poverty is much worse in rural areas than in urban areas. He elaborated that "76% of rural households were poor compared to 38.2% in urban areas". Nziramasanga (1999:177) further noted that 30.45% of rural pupils were extremely poor compared to only 5% extremely poor in urban areas. The two studies by Ganga

and Chinyoka (2010) and Nziramasanga (1999) were different in scope in that the former focused on one district while the latter was national, however, there is some agreement that the incidence of poverty is higher in rural than in urban areas. Since the current study context is rural, I believe it will bring to the fore the problems that the majority of the disadvantaged children encounter, and perhaps stimulate action to redress the situation. Notwithstanding the core business of schools, namely teaching, the researcher argues that there should be a paradigm shift in the way schools operate to accommodate an additional responsibility of caring for and supporting OVC.

Some research affirm that the majority of families in Zimbabwe cannot afford basic needs such as food and non-food items (Chinyoka, 2013: 92; Chinyoka & Naidoo, 2013:11; Gosh & Kalipeni, 2004:14). Robertson (2011:7) also points out that 88% of poor people in Zimbabwe live in rural areas. Chinyoka (2013:91) recommends that the challenges faced by OVC should be addressed by the microsystem of the school and family, the neighbourhood, mesosystem, exosystem and macrosystem as espoused by Bronfenbrenner (1979:41). The current study focuses on the role of the school (microsystem) in addressing the needs of OVC. In exploring the role of the school in the context of OVC, the researcher took cognisance of Bronfenbrenner's view that the microsystem, which comprises the family and the school, is the most proximal and significant sphere in the development of a person. Against this backdrop, the question is: to what extent do Zimbabwean primary schools respond to the needs of OVC?

3.4.3 Psychosocial Problems Encountered by OVC

Regarding psychosocial needs, Francis-Chizororo (2008:113) points out that OVC experience trauma as they take care of their terminally-ill parents or siblings. Similarly, Sengendo and Nambi's (1997) study in Uganda revealed that loss of parents caused depressive thoughts and feelings of sadness, anger and guilt. Additionally, Atwine, Cantor and Bajunirwe's (2005) study in Uganda also found that AIDS orphans in rural communities had higher levels of psychological distress than non-orphans. Atwine et al. (2005:9) thus stressed that provision of material support to orphans is insufficient on its own because they also require psychological support for trauma caused by multiple losses such as parental loss and limited educational opportunities. Although their study focused on orphans in particular, I contend that the psychosocial challenges they confront apply to other categories of vulnerable children. Wood and Webb (2008:145) warn that "psychological problems are difficult to identify that caregivers may not easily identify them". I submit that this observation calls for training of

OVC caregivers including teachers in dealing with challenges confronting OVC. This study, therefore, explores, among other things, the knowledge of Zimbabwean primary schoolteachers in handling OVC in their classrooms.

Nkomo and Freeman (2006:308) advise that OVC require more emotional sustenance from their new caregivers than from original cares. This view is based on the assumption that in a world with HIV/AIDS, most OVC would have endured both the stress of a long and difficult parental illness and death. In addition, Erwin's (2012) study in Zambia showed that OVC were worried, sad, and eager to help in the home, stopped playing and appeared distressed. Equally, some studies revealed that OVC caregivers also experience stress (Boyer & Poindexter 2005:43; Joslin & Harrison, 2002:82; Rotherman-Borus *al.*, 2002:63; Scengonzi, 2007:45). Furthermore, Kuo and Operario's (2009:2) study in South Africa revealed that caring imposes challenges on caregivers, such as financial pressures.

Although the aforementioned studies were not focusing on the well-being of OVC per se, they revealed that handling and dealing with OVC is stressful. With regard to teachers, research has shown that problems confronted by OVC are played out in the classroom as teachers struggle to balance teaching and learning with the additional demands imposed by the increased levels of anxiety, limited concentration spans and severe trauma (Wood & Goba 2011: 285; Culver, 2007:42; Foster 2002:56; Hepburn, 2002:74). In addition, Asikhia and Mohangi's (2015) research carried out in Pretoria, South Africa on the school support and psychological, emotional and behavioural consequences of HIV/AIDS on adolescents revealed that OVC experience a high prevalence of psychological and emotional problems. The study also indicated that school support offered to OVC by teachers and the general school environment was not adequate. In view of the impact of OVC on the well-being of professionals such as teachers, I argue that it is imperative for teachers to be adequately trained in handling and dealing with OVC, lest they become stressed by the challenges presented by OVC and fail to perform their duties. One of the objectives of this study is to establish the extent to which Zimbabwean primary school teachers are equipped to handle OVC.

3.4.4 Emotional Challenges Encountered by OVC

Children have wide-ranging needs from parents or guardians (Chinyoka & Ganga, 2010:189; Nkomo & Freeman 2006:305). Research has shown that in addition to food, shelter, education and other physical health care facilities, children in general, and OVC in particular, have critical emotional needs (Chitiyo *et al.*, 2008:14; Mishra *et al.*, 2008:79; Sengendo & Nambi, 1997:10).

With regard to emotional challenges, Datta (2009:4) posits that care providers often exploit and abuse OVC emotionally. Furthermore, Mushunje and Mafico (2007:22) and Muronda (2009:55) indicate that OVC suffer from emotional stress due to a number of factors, which include watching parents and loved ones dying. In addition, Sengendo and Nambi (1997:12) point out that the need for emotional support for OVC is precipitated by the fact that in most cases, they live in new and sometimes strange environments where emotional nurturance and acceptance are not 'givens. 'For example, when OVC are cared for by extended families or when they live in child-headed families, they are bound to face challenges in adapting to the new circumstances. In view of the literature reviewed, it is concluded that emotional support for OVC is a critical dimension OVC caregivers including teachers cannot afford to ignore. The question is: to what extent do rural primary schools in Zimbabwe respond to the emotional needs of OVC?

3.5 CHILD-HEADED FAMILIES AND THE WELL-BEING OF OVC

A child-headed family is a new phenomenon in Zimbabwe (Francis-Chizororo, 2008:227; Ganga & Chinyoka, 2010:187). The mushrooming of child-headed families in many African countries seems to confirm the rupture thesis, which purports that the coping capacity of the extended family has been overstretched and broken down (Abebe & Aase, 2007:261; Omwa & Titeca, 2011:2). Germann (2005:154) indicates that the child-headed phenomenon is a new mechanism to cope with the impact of HIV/AIDS that has resulted in a high number of children without parental care. The view that a child-headed family is a community-based mechanism to cope with the impact of HIV/AIDS supports the resilience theory which advances that traditional safety nets are not crumbling due to the damaging effects of the increasing number of OVC; instead, they are responding with innovative systems such as having community counsellors and community projects aimed at assisting OVC (Abebe & Aase, 2007:263; Foster, 2002:12). The focus of this section is not on the rupture-resilience debate, but on the challenges encountered by children in child-headed families.

Research has shown that child-headed families are on the increase in African countries (Foster *et al.*, 1995; Francis-Chizororo, 2008; Germann, 2005; Howard *et al.*, 2006). There are a number of factors that have precipitated the emergence of child-headed families, including parental illness, siblings wanting to stay together after parental death, exploitation and abuse by care providers (Datta, 2009:4; Francis-Chizororo, 2008:104; Germann, 2006:150).

3.5.1 Challenges Faced by OVC in Child-headed Families

OVC living in child-headed families encounter a plethora of problems such as caring for siblings at home, which normally results in the OVC heading the family and dropping out of the school system (Francis-Chizororo, 2008:104; Naidoo, 2010:1) to seek employment so as to support their siblings. Martin, Mathambo and Richter (2011:54) add that children who lack parental guidance and discipline develop anti-social behaviour such as teenage pregnancy, and drug or alcohol abuse. In view of the challenges confronting OVC in child-headed families, Salaam (2004:9) remarked that “More and more AIDS orphans are growing into young adults with little or no adult supervision”. It can be inferred that the circumstances of OVC in child-headed families deny these children an opportunity to enjoy their child rights. Children who are heads of households are in a difficult position because they support siblings with little to no education or employable skills and limited resources (Salaam, 2004:9). One of the common challenges encountered by OVC in child-headed families is role reversal (Chandiwana et al., 2009:24). This is a situation where children assume the responsibility of taking care of ill parents and performance of other general household and child care responsibilities (Chandiwana et al., 2009:24; Gumede, 2009: 11). Against the backdrop of a plethora of challenges confronted by OVC, this research seeks to explore the responsiveness of primary schools in Zimbabwe to the needs of in-school OVC.

3.6 OVC AND CHILD ABUSE

The rights of children are covered adequately in the UNCRC adopted by 189 member states (UNCRC, 1989:4). With regard to child abuse, Article 3 of UNCRC stipulates that activities and programmes that involve children should uphold the best interests of the child (UNCRC, 1989:8). Notwithstanding Article 3 of the UNCRC, children, particularly OVC, are subjected to various forms of abuse (Datta, 2009:4; Gwirayi, 2012:40; Salaam, 2004:7). Salaam's (2004) study on AIDS OVC in sub-Saharan Africa revealed that in Zambia, the majority of street children involved in sex work were orphans. In Ethiopia, the study indicated that most of the children engaged as domestic workers were orphans, and in Uganda, the study revealed that girls employed as domestic workers were subjected to sexual abuse (Salaam, 2004:8). Datta's (2009) research in the Nyanza province of Kenya indicated that OVC participated in two forms of labour: household and outside the household, which deprived them a chance to attend school. Boys were engaged in activities such as rearing cattle, tilling the land, weeding and harvesting among others. On the other hand, girls participated in fetching water, firewood, cooking and

cleaning utensils and caring for children (Datta, 2009:5). Subjecting children to such activities infringes their rights as enshrined in the UNCRC (1989). A disturbing observation in Datta's (2009) study was the active role schools played in facilitating the engagement of school children by employers. In some instances, students, mainly OVC, would work under the supervision of teachers, doing tasks such as tilling the land and transportation of materials (Datta, 2009:4). Research in Zimbabwe (Francis-Chizororo, 2008; Ganga & Chinyoka, 2010; Germann 2005; Gwirayi, 2012), and in South Africa (Naidoo, 2010; Neswiswa, 2014; Wood & Goba 2011) confirm that children, particularly OVC, confront various forms of abuse. Similarly, research in Uganda showed a high level of sexual abuse among OVC (Ministry of Gender Labour and Social Development [MGLSD], 2010). To counter the multifarious forms of child abuse that OVC encounter, it is imperative that the school as an appendage of society plays an active role in protecting the rights of children. In the context of Zimbabwe, principals are mandated to report cases of child abuse to the police. This implies that teachers and principals should be in a position to identify abused children. This raises the question of whether teachers and principals have the requisite training to identify abused children.

3.7 THE GENDER FACTOR IN THE WELL-BEING OF OVC

Gender is an important social factor which impacts the lives of men and women differently (Giddens and Sutton 2013:495). In the context of this study, the researcher explores the gender factor to find out how the boy and the girl OVC experience challenges in society in general, and in the school in particular, with a view to recommending gender-sensitive interventions.

Research by Nyamukapa et al., (2010:988) on the causes and consequences of psychological distress among orphans in Eastern Zimbabwe revealed that girls experienced more psychological distress than boys. Several studies conducted in Zimbabwe (Manwa, 2010:4; Mutekwe *et al.*, 2012:118; Ngorima, 2001:67; Nziramasanga, 1999:177) affirmed that the girl child lags behind the boy child in both enrolment figures and academic performance due to gendered cultural codes. Although the cited studies were not focusing on OVC *per se*, the disadvantaged situation of the girl child revealed by research could be the same challenges experienced by a girl OVC in Zimbabwean rural primary school. In addition, research by Horizons (2004) in sub-Saharan Africa, found out that females were more vulnerable than their male counterparts. In South Africa, Horizons (2004) found that girls were more likely than boys to be out of school. This could be caused by the patriarchal nature of most societies which value the education of a boy child at the expense of a girl child (Gaidzanwa, 2012:2; Mapfumo,

Chireshe & Peresuh, 2002:157). The difficult situations OVC normally experience force girls to turn to older men for love or as ‘sugar daddies’ in order to pay their school expenses, protect them from violence or escape poverty (Lacour & Tissington 2011; 552; Salaam, 2004:13). In view of this scenario, the researcher assumes that when OVC girls are forced by unbearable circumstances to engage in sexual activities as highlighted by research, they become susceptible to HIV/AIDS, thereby worsening their situation. Some research has revealed that the position of OVC girls is precarious because of the myths that having sex with a virgin can cure HIV/AIDS or slow disease progression (Francis-Chizororo, 2008:109; Mutangadura, 2000:8). In addition, Nziramasanga (1999:177) observed that although BEAM was meant to assist OVC in Zimbabwean schools to pay school fees, it did not cover all the deserving cases, and that the girl child suffered most. From the above observations, it can be inferred that OVC are not a homogenous group experiencing similar challenges. Boys and girls face different challenges and this should be taken into cognisance by OVC service providers. My assumption relating to the gender factor and education is that school-based programmes targeting OVC which are not gender-sensitive are bound to fail. In view of this, the researcher aims to explore the gender sensitivity of teachers and principals with a view to recommending staff-development programmes that could produce gender-sensitive school environments.

3.8 CHILD CARE THEORIES AND THE SITUATION OF OVC

This section discusses child care theories that could provide the theoretical lenses for unpacking the situation of OVC in Zimbabwe. Child care theories help us to appreciate child care systems and intervention strategies targeting OVC. Three theories, namely Bronfenbrenner’s ecological systems model, Maslow’s hierarchy of needs as well as Ainsworth and Bowlby’s attachment theories are discussed in relation to the well-being of OVC.

3.8.1 BRONFENBRENNER’S BIO-ECOLOGICAL THEORY

The bio-ecological theory is concerned with people, social change and social order and how they influence each other (Payne, 2005:142). Bronfenbrenner’s model is seen as a simplistic foundation for understanding the multi-system factors influencing development (Lewthwaite, 2011:15). This theory considers the influence of the environment on a child’s development. Bronfenbrenner (1979:91) emphasises the “joint function” that personal attributes and environmental characteristics have in influencing an individual’s development. Different factors in children’s environments are examined in order to understand ways in which they impact on their development. The theory is used in this study, to explore ways in which the

lives of OVC at school and in the community could be improved. The OVC are placed at the centre of their environment in this study, and the manner in which the environment impacts their lives as posited by the ecological model.

Bronfenbrenner's bio-ecological model comprises five nested structures namely micro-, meso-, exo-, macro- and chrono-systems (Bronfenbrenner, 1979:97; Bronfenbrenner, 1994:40). The different levels of Bronfenbrenner's ecological theory are represented diagrammatically as shown in Figure 3.1 below.

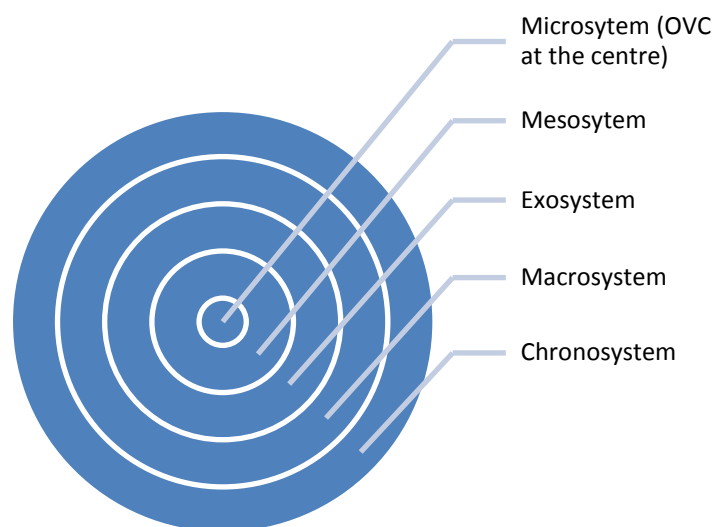


Figure 3.1: Bronfenbrenner's bio-ecological model

Source: Adapted from Seruwagi (2012:68)

3.8.1.1 Microsystem

This is the innermost and first layer of the bio-ecological model which refers to the activities and interactions that occur in a person's immediate environment (Bronfenbrenner, 1979:40). According to Bronfenbrenner (1979:41), the most proximal and significant sphere is the individual's microsystem, which comprises the pattern of activities, roles and interpersonal relations experienced by the developing person in a given face-to-face setting. The components of the microsystem, which are of importance to the development of a child, include inter alia, the family and schools (Bronfenbrenner 1994:39; Seruwagi, 2012:68). The family is a vital component in Bronfenbrenner's microsystem in the sense that interactions and circumstances within the family either encourage or discourage the fulfilment of the needs of children including OVC (Bronfenbrenner, 1979:40). It can be drawn from Bronfenbrenner's bio-

ecological theory that if OVC are raised in a healthy family set-up, they have a better chance of realising their needs. The school is part and parcel of the microsystem, and to that end, teachers are expected to execute their duties cognisant of the fact that the school has an impact on the development of the child and more importantly the OVC.

3.8.1.2 Mesosystem

This nested structure is largely about the linkages and interrelationships among the components of the microsystem, for instance, relations between the home and the school (Bronfenbrenner, 1994:40; Lewthwaite 2011:18). Bronfenbrenner emphasises the importance of strong links between the elements of an individual's microsystem, for example, between schools, homes and peers (Seruwagi, 2012:67). He further argues that non-supportive links can be detrimental to the child, for example, the child's ability to learn at school can be supported or frustrated by the attitudes of the family or peers (Seruwagi, 2012:68; Neswiswa, 2014:51). The school is a crucial component of the mesosystem; it is a continuation of the home in that schools perpetuate similar values as those in the home (Giddens & Sutton, 2013:85; Neswiswa, 2014:60). It is argued that when children are at school they depend on their teachers for guidance, support and parenting until they return home where their parents assume the same responsibility (Lewthwaite, 2011:19). The current study seeks to explore connections between structures in the mesosystem and how these connections impact the life experiences of OVC.

3.8.1.3 Exosystem

Exosystem is the third level of Bronfenbrenner's bio-ecological model, which consists of the systems that individuals do not experience directly, but may influence their day-to-day activities (Seruwagi, 2012:68; Lewthwaite, 2011:19). Examples of components of the exosystem are government institutions and NGOs just to mention a few. These influence the child's setting in an indirect manner; hence, exo-issues received attention in this study, with a view to understanding how they impact on the OVC and their families.

3.8.1.4 Macrosystem

The macrosystem is the fourth level of Bronfenbrenner's bio-ecological model (Bronfenbrenner, 1979:41). It refers to the broader context within which all other systems are embedded (Bronfenbrenner, 1994:43; Neswiswa, 2014:67). According to Lewthwaite (2011:18), the macrosystem refers to societal and cultural ideologies and laws that impinge on the individual. The macrosystem provides a broader framework for everything

(Bronfenbrenner, 1979:46; Seruwagi, 2012:70). Examples of macro-issues are government policies and global treaties and conventions (Naidoo 2010:54; Seruwagi, 2012:70). The researcher was motivated by Bronfenbrenner's theory to explore issues at the macro-level, for example, government policies such as NAPs and how they influence the well-being of in-school OVC.

3.8.1.5 Chrono-system

The last stage of Bronfenbrenner's bio-ecological model is the chrono-system (Bronfenbrenner, 1979:41). This stage covers changes that occur in both the individual and the environment over time (Bronfenbrenner, 1994:40). Some developments that fit Bronfenbrenner's chrono-system are changes in employment, residence or death of a loved one (Neswiswa, 2014:36). The chrono-system of Bronfenbrenner's bio-ecological theory is of relevance to this research since the research explores the life experience of OVC, such as the impact of the death of parents, among others, which fall within the ambit of Bronfenbrenner's chrono-system.

3.8.2 MASLOW'S HIERARCHY OF NEEDS THEORY

The fulfilment of the needs of OVC can also be understood when examined through Maslow's theory of motivation (Figure 3.2). According to Maslow (1970), needs are categorised in terms of a hierarchy (Bergh & Theron, 2009:132; Mwamwenda, 2004:239). In his theory, Maslow pointed out that some needs, for example, physiological needs are basic and must be satisfied before the higher needs can be felt and fulfilled (Feldman 2009:319; Mwamwenda, 2004:239;). He contends that physiological needs are the most potent of all needs; hence they should be well gratified. A person who lacks food, safety, love and esteem would most probably hunger for food more strongly than anything else (Bergh & Theron, 2009:132; Feldman, 2009:239). Mwamwenda (2004:239) suggests that learners should be provided with adequate nutrition both at home and school; hence, parents should ensure that children bring healthy lunch to school. Research has also shown that OVC encounter lack of nutrition.

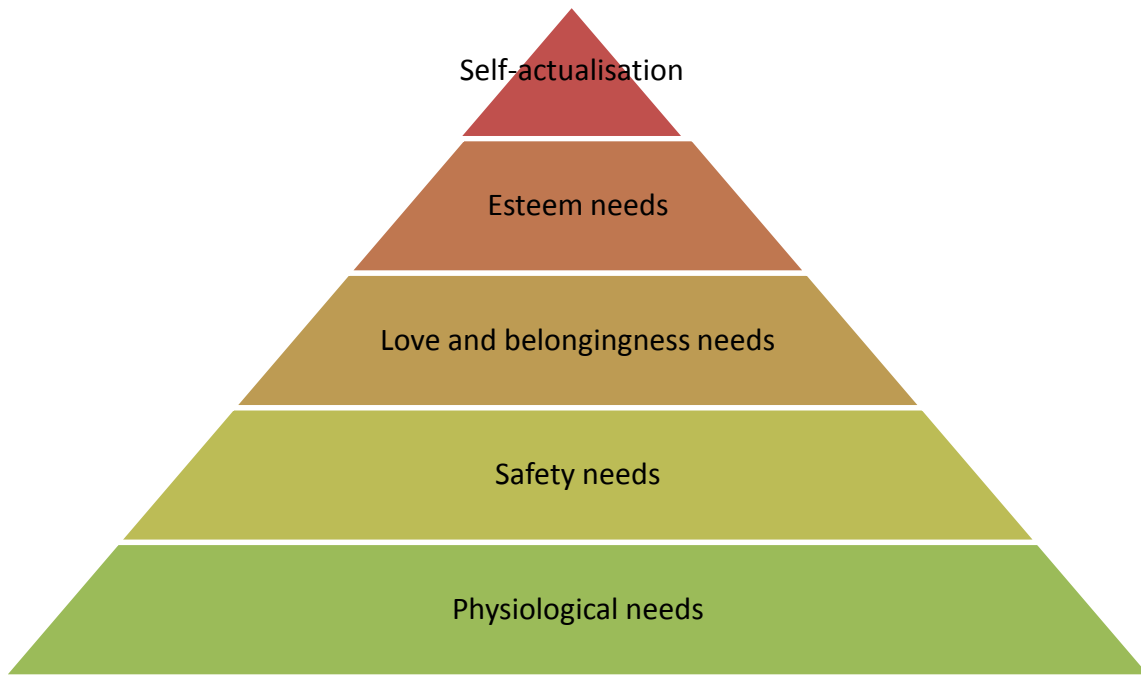


Figure 3.2 Maslow's hierarchy of needs

Source: Adapted from Bergh and Theron (2009:133)

Thus, viewed from Maslow's hierarchy of needs, it is evident that the physiological needs of OVC have to be satisfied. The researcher argues that the school has a role to play in addressing the physiological needs of OVC. The question that this study seeks to probe is: do Zimbabwean primary schools have the capacity to address the physiological needs of OVC?

3.8.2.1 Psychological needs

Maslow (1970) maintains that once physiological needs are well gratified, there emerges a new set of needs, namely safety needs (Bergh & Theron 2009:132). It has been observed that children's safety needs are important to their sense of security. Mwamwenda (2004:239) recommends that schools must ensure that children are protected against security-threatening factors. This study examines the role of schools in addressing the psychological needs of OVC, which dovetail with Maslow's hierarchy of needs theory.

3.8.2.2 Love and belonging needs

The third category of needs in Maslow's hierarchy of needs model is love and belonging (Berg & Theron, 2009:131). According to Maslow (1970:32) the satisfaction of physiological needs stimulate the desire to fulfil emotional needs. At this level, the person keenly feels the absence of friends, a wife, husband, partner or children (Bergh & Theron, 2009:133). Mwamwenda (2004:239) suggests that teachers should make learners feel that they are loved and belong to the class. The researcher contends that teachers can instil a sense of love and belonging by not discriminating against learners in their classes and by visiting sick learners at their homes or hospitals. OVC are the neediest in terms of love and belonging needs because of their disadvantaged background; hence, schools can fill the gap.

3.8.2.3 Self-esteem needs

The fourth category in Maslow's hierarchy of needs model is self-esteem (Berg & Theron, 2009:131). Satisfaction of self-esteem needs leads to feelings of self-confidence, worth, strength, capability and adequacy of being useful in the world (Bergh & Theron 2009:132). In the case of learners, particularly OVC, teachers can assist them to develop a positive self-concept by treating them as persons of worth with human dignity (Feldman, 2009:319; Mwamwenda, 2004:239). This can be achieved by assigning OVC positions of responsibility and avoiding labelling and discrimination among others.

3.8.2.4 The implications of Maslow's hierarchy of needs theory

The four categories of Maslow's hierarchy of needs discussed indicate that the developing child is dependent on external factors in the physical, socio-economic and socio-cultural environment for satisfaction of their needs (Bergh & Theron, 2009:133). Viewed in the context

of the current study, it can be argued that OVC need other people and societal structures to help them satisfy their needs. Schools are critical institutions of society which should be actively involved in caring and supporting OVC.

3.8.3 ATTACHMENT THEORY AND THE WELL-BEING OF OVC

Attachment theory developed by Ainsworth (1989) and Bowlby (1988) is relevant in this study, which seeks to understand the situation of OVC. The theory provides a framework to help understand the interpersonal relationships and interactions of children cared for by relatives (Edwards & Sweeney, 2007:4). Hartup (1993:54) state that the ability of children to develop socially appropriate relations is hinged on attachment to caregivers experienced early in life. A study by Dubowitz, Feigelman, Zuravin, Tepper, Davidson and Lichtenstein (1994:6) in America revealed that children raised by relatives experienced physical, developmental, mental health and school problems. On the other hand, the same study revealed that children cared for by their biological parents experienced love and consistent parenting, which build firm, secure attachment with their parents. Ainsworth (1989:710) observed that children who are deprived of love and appropriate care during infancy often develop insecure attachment relationships. This could be the situation faced by in-school OVC in Zimbabwean primary schools since some of these children are cared for by grandparents who are too old to provide them with basic necessities let alone forge secure attachments (Fuller-Thomson, 2005:61; Strom, 2000:33). Furthermore, Belsky (1999:25) observed that children who are securely attached are more apt to develop and use problem-solving skills. Such children have been found to be eager to explore, assimilate, adapt and learn from their environment (Dent & Cameron, 2002:64). On the contrary, research has shown that children who are insecurely attached encounter social, emotional deficits and difficulty in school functioning. Shaver and Mikulincer (2009:35) observed that insecurely attached children are apprehensive about others in school and encounter problems in completing demanding academic work. In view of the fact that most OVC are cared for by grandparents (Fuller-Thomson, 2005:61; Strom, 2000:33), there is a high probability that in-school OVC in Zimbabwean primary school are insecurely attached, and grapple with challenges such as social and emotional instability. This, therefore, requires that schools implement programmes aimed at ameliorating problems associated with insecure attachment faced by in-school OVC. The following section will discuss OVC care theories and different OVC care systems implemented in Africa.

3.9 OVC CARE THEORIES AND PRACTICES

Literature on the capacity of the extended family to care for the growing number of OVC generated two competing theories; the rupture and social resilience theories (Abebe & Aase, 2007:2062; Kuo & Operario, 2009:2; Omwa & Titeca, 2011:9). This section discusses the rupture and resilience theories and the childcare systems associated with them.

3.9.1 The Social Rupture Theory and Care of OVC

The rupture theory is a common theme in literature on OVC (Omwa & Titeca, 2011: 9). The theory argues that the traditional family structure and social support system of orphan care is overstretched and eroded (Abebe & Aase, 2007:2062; Chirwa, 2002:13). It further advances that all support systems provided by the family and the community are collapsing due to the strain imposed by the rising numbers of OVC. The theory paints a bleak picture of the ability of the family to cope with the OVC problem. According to the proponents of this thesis, a social rupture occurs when a calamity strikes, for example when death of a household head occurs weakening both the nuclear and the extended families (Abebe & Aase, 2007:2063). When such calamities strike the capacity of the community to care for OVC is reduced (Chirwa, 2002:13; Omwa & Titeca, 2011:10). The present era where HIV/AIDS is decimating household heads, leaving behind orphaned children could be evidence that society is rupturing. Research has indicated that HIV/AIDS has depleted the traditional safety net system to a breaking point, reducing its ability to care for OVC adequately (Foster, 2000:64; Masuka et al., 2012:11; UNICEF, 2003:21). In addition, studies by Chirwa (2002) and Foster (2002) indicated that the collapse of the extended family resulted in many orphaned children slipping through the safety nets and reverted to early marriages or other forms of child labour such as domestic work or prostitution.

According to the proponents of the rupture theory, the solution to caring for the burgeoning number of OVC rests on promoting external intervention of care in places like foster homes, children's villages and orphanages (Abebe & Aase, 2007: 2069; Ntozi, 1997:41). In the light of this, the researcher argues that the role of the school in caring for and supporting OVC can be better understood when analysed in the context of the rupture theory. If the traditional safety net (extended family) is strained and failing to care for OVC as advanced by the rupture theory, the intervention of other institutions like schools in caring for and supporting OVC becomes relevant.

3.9.1.1 Limitations of the rupture theory

The rupture theory has been heavily criticised for failing to give a clear account of how communities respond to the OVC crisis (Omwa & Titeca, 2011:10; UNICEF, 2006:14). The theory views communities as helpless victims and recipients who should be assisted, ignoring the agency of the communities to act in solving their problems (Foster, 2002:23; Oleke et al., 2007:16; UNICEF, 2006:14). Critics of the rupture thesis argue that the situation of OVC varies by context; hence, responses to their needs should take cognisance of their context in order to offer feasible interventions (Oleke et al., 2007; 16; Omwa & Titeca, 2011:11; UNICEF, 2006:15). This study's focus is on the responsiveness of rural primary schools in Zimbabwe to the needs of OVC. Thus, the researcher considered the context of the sampled OVC, realising that their situation in the rural areas is different from that in the urban areas.

3.9.2 Social Resilience Theory and Care of OVC

This theory was developed in response to the criticisms of the social rupture thesis. The theory is optimistic about the capacity of the family structure to overcome the damaging effects of the increasing number of OVC (Omwa & Titeca, 2011:12). It argues that in Africa, many communities are not disintegrating and support systems are not crumbling, but respond to the OVC crisis with innovative systems (Chirwa, 2002:21; Foster, 2002:34; Omwa & Titeca, 2011:11). Furthermore, Abebe and Aase (2007:2067) posit that within the communities, there are multiple dimensions of care and many tiers of resilience. They add that resilience of a community can take two forms; firstly, it may be aimed at maintenance of its institutions like the family regardless of hardships; secondly, resilience may be aimed at promoting community development beyond the present level of functioning.

The resilience thesis holds that regardless of the destructive force of change, families and communities respond to crisis with resilience and not disintegrating as suggested by the rupture theory (Friedland & Price, 2003:19). In addition, Omwa and Titeca (2011:11) state that the concept resilience takes two dimensions. First, it connotes solidarity, stoutness and resistance, and second, it denotes elasticity or flexibility (Omwa & Titeca, 2011:12).

It can be deduced from the two aforementioned dimensions that resilience can be regarded as a community capacity, hope and faith related to a community's ability to withstand major hardships, overcome adversity and to prevail and cope effectively with change (Ladau, 2007:18; Friedland & Price, 2003:24). The two theories have inspired policy debate on how

best to address the OVC crisis in Africa and have influenced the adoption of institutional and community-based care systems (Omwa & Titeca 2011:11; Kuo & Operario 2009:2).

3.10 OVC CARE SYSTEM IN SUB-SAHARAN AFRICA

Literature from sub-Saharan Africa shows that OVC are well-looked-after in the communities and have their basic needs met by their extended families (Seruwagi; 2012:26). Fernnil, Kay and Krishna (2010:14) maintain that families and communities are the frontline providers; the only providers of care for OVC and support in some parts of developing countries. Salaam (2004:12) adds that local communities are the primary loci of support for OVC. The role of family and community in caring for and supporting OVC has been given priority with institutional care viewed as a last resort (Byenkya, Pillay & Oti, 2008: 6). The types of care offered to OVC in sub-Saharan Africa vary from formal children's homes to informal adoptions. Desmond and Gow (2001:8) proposed six models of care representing a continuum from more formal to more informal models as shown on the next page.

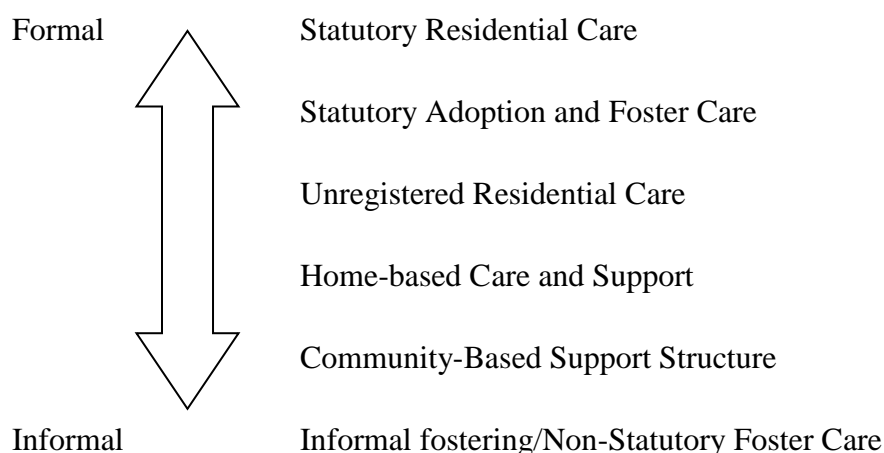


Figure 3.3: Model of care: Formal to informal

Source: (Desmond & Gow, 2001: 8)

According to Desmond and Gow (2001:8), the more formal models have high costs, while community-based care (informal) is cost-effective. The formal model comprises three levels from the statutory residential care to unregistered residential care while the informal also comprises three levels from home-based care and support to non-statutory foster care. Desmond and Gow (2001:8) further observed that informal models experience challenges in mobilising resources, which is detrimental to the well-being of OVC. In the same vein, Engle

(2008:8) posits that responses to the multiple needs of young children require coordination of approaches across sectors. He adds that formal and informal models of care can complement each other in improving the well-being of OVC. Against this backdrop, I argue that the school can play a critical role in promoting the nexus between formal and non-formal models of child care by forming partnerships that promote the well-being of OVC.

3.10.1 Institutional care of OVC

The institutional approach to OVC care is informed by the rupture thesis. The approach stresses formal centralised arrangements in care and support provision to OVC (Chirwa, 2002:22; Abebe & Aase, 2007:2069). They further contend that institutional care is manifested in orphanages and children's homes. There are a number of studies that support the rupture theory; for instance, Ntas and Mukiza-Gapare's (1995) study in Uganda which revealed that the extended families were unable to cope with the strain of rising numbers of OVC. In Zimbabwe, research has shown that extended families struggled to support OVC (Francis-Chizoro, 2008; Germann, 2006; Masuka et al., 2012; Muronda, 2009). Furthermore, Gandure (2009:55) observed that in Zimbabwe, both institutional and community-based care of OVC are being implemented by various agencies. Institutional care has, however, been noted to be fraught with challenges which impact negatively on the development of children.

3.10.1.1 Limitations of institutional care of OVC

Institutional care is viewed as a measure of last resort (Omwa & Titeca, 2011:11). It is criticised for failing to prepare OVC for adult roles as it places little effort on teaching social skills. Furthermore, Masuka et al. (2012: 14) and Omwa and Titeca (2011:10) argue that children who grow up in institutions often fail to develop their own identities and may feel alienated from their communities. Masuka et al., (2012:14) add that institutional care is not well received in Africa as it undermines the traditional modes of care, which ground children in their culture. On the same issue, some authorities have argued that residential care fails to meet the stipulations of the Convention on the Rights of the Child (UNICEF, 2006:15; International HIV/AIDS Alliance, 2009:8). For instance, Article 3, which emphasises the best interests of the child, is violated when children are placed under institutional care without their consent. In relation to this study, this prompts the question: what role can schools play in situations where OVC are kept and cared for in institutions? I contend that partnerships between schools and orphanages can be forged to the benefit of OVC; for instance, schools can prepare a timetable that accommodates OVC from orphanages.

3.10.2 The Community-Based Approach to Care of OVC

The community-based approach to child care is grounded in the social resilience thesis. This approach is supported by the World Bank as Community-Driven Development (CDD) (Omwa & Titeca, 2011:10). Advocates of the CDD approach argue that the community-driven interventions are the most cost-effective and well-attuned to the prevailing African socio-cultural context (Chirwa, 2002:75; Foster, 2002:53). A number of studies have indicated that the family and community structures have the capacity to respond to the plight of the OVC (Freeman & Nkomo, 2006: 54; Doring, Junior & Stella, 2005:103; Rotherman-Borus al., 2002:91). In addition, research has revealed that communities and families have devised innovative coping mechanisms and strategies to help address the plight of OVC (Foster, 2002:126; Naidoo, 2010:135; Wood & Goba, 2011:85). For instance, some communities have established self-help groups, associations and clubs that assist households fostering OVC materially and emotionally.

From the literature reviewed and my experience as both a citizen and resident of Zimbabwe, both institutional and community-based approaches to OVC care are implemented. This study, therefore, seeks to establish the role played by schools in the prevailing approaches to OVC care. I argue that since the study context is rural, the nexus between the school and the community-based approach is emphasised. In exploring the place of the school in caring for and supporting OVC, the researcher takes cognisance of Abebe and Aase's (2007:84) caution that romanticising the extended family system without critical assessment of its constraints would result in placement of OVC in unprepared families to the detriment of OVC. They further argued that implementation of external programmes without looking into the potential of families can waste resources. The following section looks at some specific community- and family-based OVC interventions adopted in some sub-Saharan African countries.

3.10.2.1 Community-based OVC interventions in sub-Saharan Africa

In Africa, most OVC are cared for by the extended family (Jackson, 2002:276). However, although the extended family has been the main traditional safety net for OVC, the institution has become saturated, overwhelmed and weakened in recent years for a number of reasons: the high incidence of OVC; death of prime-age caregivers due to HIV/AIDS; and transformation of the traditional family unit (Haralambos & Holborn, 2010:623; Jackson, 2002:282). In view of this, the capacity of the extended family to care for and support OVC has been compromised; hence, the new models have emerged.

The following section focuses on the interventions towards OVC adopted in sub-Saharan Africa in the face of the dwindling capacity of the extended family as an OVC safety net. It is, however, important to note from the outset that most of the interventions adopted in sub-Saharan countries stress the central role of mobilising community-based projects to keep affected children within the extended family (Omwa & Titeca, 2011:9; Strebel, 2004:8).

Jackson (2002:283) reported about a community-based intervention for OVC in Rufiji region of Tanzania called the 'Big mama'. The big mamas were women who retired from the civil service and were chosen on the basis of their educational qualifications, skills and motivation for the role. The big mama's role was to care for and support OVC, and was supported by a non-governmental organisation called Danish International Development Agency (DANIDA) (Jackson, 2002:283) through a local organisation called Society for Women and AIDS in Africa (SWAAT). The big mamas attended workshops to build their capacity in dealing with OVC. Their role entailed visiting households with OVC to provide various forms of material, financial and psychological support.

Strebel (2004:9) also reported about a number of community and family-based OVC interventions implemented in some sub-Saharan countries. For example, in Malawi, a project called Community-based Options for Protection and Empowerment (COPE) was implemented by Save the Children Federation of the United States of America. The project adopted a systematic approach to mobilising community-based responses to the needs of OVC (Strebel, 2004:4). The objectives of COPE were to:

- Strengthen community capacities of care and support of OVC;
- Mitigate the impact of HIV/AIDS;
- Identify, assist and protect OVC; and
- Increase economic opportunities and resources to OVC households.

To achieve the set objectives, COPE undertook various activities, which included identification, monitoring assistance and protection of OVC, engaging guardians and schools for OVC to attend school, home-based care, training for caregivers, income-generating projects and activities that promote OVC's psychological development (Strebel, 2004:6).

Research has also shown that community and home-based interventions for OVC are preferred in most African countries. Among others, these include: Families, Orphans and Children under Stress (FOCUS) implemented in Zimbabwe (Drew, Mafuka & Foster, 1998:23); the Children

in Distress Network (CINDI) in South Africa (Hasewinkel, 1999:41; Smart, 2003; 110); Project Concern International (PCI) in Zambia (Strebel, 2004:7); and an orphan trust established in Botswana to deliver essential government services to OVC (UNICEF, 1999:16). Outside Africa, Aviezer, Van IJzendoorn, Sagi and Schuengel (1994:101) noted the Kibbutz childcare system in Israel, which is also a community-based childcare system.

An analysis of the interventions implemented for OVC in African countries and elsewhere suggests that the intervention of choice is home-based community supported care. Against this backdrop, the question is: what role can Zimbabwean primary schools play in the home-based community care of OVC? Bennel, Alison, Stein, Alison and Canter (2001:41) suggest that schools could contribute towards the welfare of OVC through engaging in various programmes, such as identification, referral and monitoring, school-feeding, pastoral care and counselling, financial assistance with fees and other school-related expenses as well as involving guardians and carers in school-based OVC projects. Drawing from the observation of Bennel et al., (2001), I contend that one of the key functions of Zimbabwean schools is to address the needs of learners including OVC. Thus, this study aims to assess the responsiveness of Zimbabwean primary schools to the needs of in-school OVC.

3.11 THE ROLE OF THE FAMILY IN THE WELFARE OF CHILDREN

A family is an important institution in society, which fulfills a number of roles. This section explores the role of the family in personality development of children and its impact on education.

3.11.1 The Family and Personality Development of Children

The family is an indispensable agent of socialisation (Giddens & Sutton, 2013:715; Haralambos et al., 2010:633). It introduces young members of society to the expectations of the wider society. Functionalists like Parsons maintain that young children should be initiated into the culture of society at a tender age so that they can fit well in the wider society (Giddens & Sutton, 2013:586; Haralambos et al., 2010:640; Schaefer, 2010:43). Interactionists such as Mead and Cooley concur with functionalists on the role of the family in the socialisation of children. The situation of OVC is likely to be adversely affected by lack of proper socialisation since some of them live in child-headed families.

3.11.1.1 The looking glass-self theory

According to Cooley (1922, cited in Schaefer, 2010:48 and Livesey & Lawson, 2009:43), there are three stages in the development of the self-concept: imagining how individuals appear to others; imagining how others judge one's appearance; and developing a feeling about these judgements. Cooley (1922, cited in Giddens & Sutton, 2013:481; Schaefer, 2010:35) stressed that society serves as a looking glass that reflects one's self-concept. Implicitly, the family serves as a looking glass through which a child reflects himself or herself. It can, therefore, be extrapolated that all children including OVC should belong to some family to enhance the development of a positive self-concept. I submit that this is where schools could come in to fill the gap left by deceased parents when teachers fulfil the loco-parentis role of nurturing OVC.

Mead (1931, cited in Giddens & Sutton, 2013:501) adds that a person develops his/her personality and internalizes attitudes through interactions (socialisation). He further argues that individuals take the role of others in order to understand themselves. He further emphasises the importance of the 'significant others'. The 'significant others' are those people in society that are held in high esteem, for instance, parents, teachers and pastors (Haralambos et al., 2008: 640; Livesey & Lawson, 2009:45). For children in the family, the significant others are parents and siblings; these are the people who approve or disapprove what the child does. Mead and Cooley's theories on personality development are in tandem with Coleman's social capital theory. This theory emphasises the physical presence of adults in the family and the attention they give to children (Farganis, 2011:248; Haralambos et al., 2008:630). Coleman, (1996:34) further states that the absence of adults in the family to guide children, a situation called 'structural deficiency', promotes development of anti-social behaviour among children (Giddens, 2009:622; Farganis, 2011:250). I argue that schools should come in to provide parental guidance to OVC, some of whom are orphans and are experiencing structural deficiency to the detriment of development of positive self-concepts of these children.

Children fall into at-risk or OVC category for multiple reasons, which include poverty, separation from parents, HIV/AIDS and other diseases, gender discrimination, war and conflicts (Zoll, 2011:7; Biemba, Miller, Simon, Lucas & Reves, 2012:18). It can be deduced from the different categories of vulnerable children mentioned that the situations confronting OVC deny them an opportunity to experience a warm and loving family life that facilitates the development of a positive self-concept. In Zimbabwe, research has shown that child-headed families are on the increase and that such children encounter a plethora of problems such as

stigma and discrimination (Francis-Chizororo, 2008:78; Ganga & Chinyoka, 2010:188; Germann, 2005:201). I suggest that community-based approaches be stepped up in which schools and teachers in particular are encouraged to play the loco-parentis role diligently lest OVC become social misfits.

The importance of parents to the well-being of children particularly mothers have been stressed by Mutangadura (2000:3), who observed that:

The health and life situation of any women is crucial to the health and life chances of her children not only during pregnancy but throughout the entire childhood. A mother's capacity for childcare, the time and energy she can devote to her children, the conditions in the home her material resources, her skills and resources continue to govern a child's passage from childhood to maturity, socially, physically and emotionally.

Thus, the void left by parents in the life of children when they die, separate, or migrate for political or economic reasons exposes them to a number of challenges that impact negatively on their well-being. This study, therefore, seeks to establish the extent to which rural primary schools are prepared to fill the gap left by parents in the life of OVC.

3.12 THE ROLE OF EDUCATION IN THE CONTEXT OF HIV/AIDS AND OVC

Education plays a vital role in society in solving developmental problems. In the context of HIV/AIDS, education plays a central role in the multi-sectoral response to HIV/AIDS in reducing stigma, promoting prevention and providing access to care of OVC (Blackett, Dibinga, Kaichi & Matinhure, 2006:4; MOESEC, 2012-2015:2). Schools are viewed as key players in the provision of care and support services to OVC (Blackett et al., 2006:4; Chamba, 2010:19; Wood & Goba, 2011:285). Educational institutions are well placed to respond to the HIV/AIDS pandemic and the OVC crisis (Aggleton, Yanka & Crewe, 2011:495; Mupa, 2012:42; Naidoo, 2010:91). Furthermore, Ganga and Maphalala (2014:14) indicate that the school is the safest place for all children at risk in that these children can share experiences and learn to deal with challenges confronting them. Thus, Ganga and Maphalala (2014:14) state that for OVC, teachers and peers within the school are the shoulders on which they can cry on. From the foregoing, it can be inferred that education is viewed as part of the solution to the problems bedeviling OVC. This optimistic view of the role of education in addressing challenges confronting in-school OVC is critically explored in this study, with a view to recommending feasible interventions for Zimbabwean rural primary schools. In view of the crucial role played

by education in the well-being of children, various international, regional and national policies on OVC care and education are examined in this section.

3.12.1 International Policies and Education

The Convention on the Rights of the Child (UNCRC), which came into effect in 1989, covers a wide range of the rights of children (Blackett et al., 2006:4; Chinyoka, 2013:92; UNCRC, 1989:3) (see sections 3.3.1-3.3.1.2). The provisions of UNCRC adequately address the educational needs of all children including OVC that if member states that ratified the Convention adhere to its provisions, the educational needs of OVC can be catered for. The problem with many countries is that there is a disjuncture between policy and implementation; that is, governments can come up with excellent policies, but fail to implement them. For example, Zimbabwe has a well-defined legislative and policy framework to support children but lack of resources militates against the full implementation of key policies. Jensen (2000:15) refers to this as political symbolism, signifying policies that are formulated without specific implementation strategies and political will by technocrats or government officials. Additionally, the UNGASS Declaration of Commitment on HIV/AIDS (United Nations, 2001:7) stresses the importance of both international and political commitment in addressing the plight of OVC (Naidoo, 2010:98) (see section 3.3.2). Zimbabwe is a signatory to both UNCRC and UNGASS, yet a number of OVC are denied access to education (Chinyoka & Ganga, 2010:189; Francis-Chizororo, 2012:108; Masuka et al., 2012:5). The experience of the researcher as a secondary school teacher for 17 years attests to the research findings that OVC's educational opportunities are slim. The situation in Zimbabwe could be exacerbated by the economic challenges the country has been going through since the commencement of the controversial land reform in 2000, which triggered the economic meltdown and the hyperinflation of the Zimbabwean dollar (Moyana, 2002: 25). Other policies and initiatives that are relevant to Zimbabwean teachers and other OVC service providers are the Millennium Development Goals (MDGs) 2000-2015, Education For All (EFA) 2000-2015, the United Nations Literacy Decade (UNLD) 2003-2012, the Girls and Women's Education Initiative (2005) and the United Nations Decade of Education for Sustainable Development (DESD) 2005-2014 (Blackett et al., 2006:12). These initiatives emphasise the idea that education is a fundamental human right and a prerequisite for development, and therefore should be accessed by all children including OVC. Equally important in this regard is the 2030 Agenda for Sustainable Development Goals (SDGs) adopted by the world leaders to guide development in UN member countries (UN, 2015:2). The SDGs replaced the Millennium Development Goals

(MDGS) and came into effect in January 2016. There are 17 goals and 169 targets built on MDGS and aimed to complete what MDGS did not accomplish (UN, 2015:4). Of relevance to this study are SDGS 3 and 4 which emphasise the promotion of the well-being and capabilities of all citizens, to reach their potential, irrespective of class, gender, ethnic origin or race, and ensuring inclusive and equitable quality education. One of the targets of goal number 4 is to eliminate gender disparities in education and ensure equal access to all levels of education for the vulnerable children. This study therefore, aims to determine among other issues the extent to which rural primary schools in Zimbabwe cater for the educational needs of OVC.

3.12.2 The Zimbabwe Education Act [25.04.1987]

Education in Zimbabwe and related educational activities are guided by the Education Act of 1987 (Education Act Chapter 25.40 1987).

The Education Act of 1987 has three critical sections stated namely:

- 4(1) this provision stipulates that every child has a right to education;
- 4(2) emphasises that there should be no discrimination in school admission; and
- 4(10) emphasises the right of admission of a child to the nearest government primary and secondary schools.

It can be noted that the Act cited above is in alignment with Articles 28 and 29 of the CRC (1989) and other international and regional conventions that advocate the democratisation of basic education. This prompts the question: to what extent is the Zimbabwe Education Act of 1987 translated into reality? Commenting on the implementation of international policies relating to education in Africa, Chinyoka (2013:93) posits that the targets set have been missed mainly due to poverty. Admittedly, this implies more challenges in accessing education by the disadvantaged children like OVC. This could be the situation experienced by the OVC in Zimbabwean rural primary schools; hence this study seeks to find out the situation prevailing in these schools.

3.13 THE CAPACITY OF SCHOOLS TO ADDRESS THE NEEDS OF OVC

The school is viewed by society as the trusted and ideal institution for teaching about HIV/AIDS and supporting OVC (Chamba, 2010:19; MOESAC, 2012-2015:2; Mupa, 2012:42). In this regard, school heads and teachers are perceived by the community as paramount in the dissemination of knowledge and information about HIV/AIDS and care of

OVC (MOESAC, 2012:2; Naidoo, 2010:94; Wood & Goba, 2011:284). Naidoo (2010:95) stresses that educational institutions are well placed to respond to the HIV/AIDS pandemic and the OVC crisis. This view of society is embedded in the functionalist perspective, which claims that the school is a society in miniature, implying that it should work in harmony with the wider society (Giddens & Sutton, 2013:584; Haralambos et al., 2010:630; McNeil & Townley 1994:45). The school should ensure that the rights of the whole child to survival, protection and development and participation are at the centre (Mupa, 2012:36; Zimbabwe Education Act, 1987:04.25).

Education is a prerequisite for OVC to leverage improvement in their lives (Seruwagi, 2012:10). It can reduce children's risk of HIV infection by increasing knowledge, awareness, skills and opportunities enabling them to care for themselves better (Mathambo et al., 2011:15). Schools can also provide supportive environments for OVC, helping them to learn social skills and providing peer psychosocial support (Mathambo et al., 2011:15; Wood & Goba, 2011:10).

What can be drawn from the above assertions is that for education to have optimal benefit in society, it should be accessed by all children without discrimination. The question is: do schools cater for the needs of all children including in-school OVC? The following section is devoted to the challenges confronted by schools in fulfilling their mandate of providing education and care to children.

3.13.1 Teachers' Training in the Context of OVC Care and Support

It is the researcher's view that the success of any programme hinges on the implementers' knowledge of the programme. HIV/AIDS and the OVC crisis call for teachers with awareness, sensitivity and psychosocial skills needed to cope with the challenges posed by these phenomena. The researcher contends that programmes that are rushed to be implemented in schools without adequate training of the implementers (teachers) are bound to fail. Wood and Goba (2011: 290) observed that although learner needs are paramount, it cannot be assumed that every teacher possesses the necessary knowledge, skills, attitudes and values to respond to the emotional, material and educational needs of vulnerable children. Examples abound to support this view; for instance, in a study on teachers' knowledge to teach HIV/AIDS in Kenya by Mwebi (2007), it emerged that teachers were ill-equipped to teach the subject. One of the teachers in the sample expressed their concerns that:

We are supposed to teach HIV/AIDS Curriculum. We do not know how to teach it. We have only two reference books and they are for the whole school. So, you find it very hard. In most schools, it is not taught because we do not know what to teach (Mwebi, 2007:86).

Research in Zimbabwe on the implementation of HIV/AIDS curriculum (Chamber, 2010:7; Mupa, 2012:205, Mugweni, 2012:69) revealed that teachers and school administrators lack training on the topic of HIV/AIDS which poses problems in the implementation of the curriculum. In another study by Runhare (2010) on the institutional responsiveness to mainstreaming pregnant learners in formal education in South Africa and Zimbabwe, it was found that schools had no capacity to identify and deal with the needs of pregnant learners. In this study, teachers expressed that they were incapable and not confident to assist pregnant learners. In addition, research on OVC and education in different sub-Saharan African countries revealed that teachers were ill-equipped to assist OVC (Mwoma & Pillay, 2016:7; Naidoo, 2010:95; Wood & Goba 2011:284). For example, Datta's (2009:5) research in Tanzania indicated that teachers concentrated on academic performance at the expense of psychological challenges confronted by OVC. The study further revealed that teachers exploited OVC by engaging them as cheap labour. Furthermore, Wood and Goba's (2011) study in South Africa on the effectiveness of teacher training programmes to deal with OVC in the classroom indicated that the approaches were not effective. In the same vein, Chamber's (2010) research in Zimbabwe on the extent to which HIV/AIDS curriculum has been implemented in primary schools, found that teachers were not teaching guidance and counselling despite the fact that it was timetabled; instead, they devoted this time to teaching core and examinable subjects. Additionally, the study identified gaps related to knowledge transfer from teachers to learners; only 4% of Grade 6 pupils in Zimbabwe had the required HIV/AIDS-related knowledge compared to 93% of teachers. In another study by Mwoma and Pillay (2016) on challenges faced by educators to provide psychosocial support to OVC in South Africa, it emerged that teachers lacked knowledge related to life skills which compromise provision of support to OVC. From the foregoing it can be deduced that teachers who should assist in addressing the needs of OVC are ill-equipped for the task hence education cannot be viewed as a panacea to the OVC problem. However, Campbell, Andersen, Mutsikiwa, Madanhire, Skodval and Gregson's (2014) research in Zimbabwe on children's views on school support for OVC found that teachers and fellow learners assisted OVC although the assistance was viewed as patchy and minimal.

On care and support of OVC, the Zimbabwe government appears to be concerned with the welfare of OVC as it has put in place policies and programmes targeting OVC; for example, BEAM, NAP for OVC, National Orphan Care Policy and Teacher Education and Child Vulnerability programme (NAP for OVC, 2004: 18; Ongevalle, Chipimbi, Sibanda, Hupmans & Williams, 2008:4).

Teacher Education and Child Vulnerability Programme (TECVP) and BEAM aim to support the education of disadvantaged children. The vision of TECVP is that Zimbabwean teachers should have the capacity and commitment to address the needs of OVC. Furthermore, it stipulates that schools and communities should be child-friendly, non-stigmatising, gender-sensitive and supportive for both the teacher and OVC (Ongevalle et al., 2008:4). While the policies and related visions targeting OVC are clearly stated and sound effective, research found that they are not (Chamba, 2010:15; Chase, Wood & Aggleton 2004:6; Campbell et al., 2014:25; Matshalaga, 2002:51). For effective implementation of programmes targeting OVC in schools, support from teachers and school leadership is needed (Naidoo, 2010:184). Thus, Chiome (2012:73) advises that for schools to succeed in providing services to all children, they should be able to identify learners' needs, failure of which may create gaps that impact negatively on the quality of education. Furthermore, Bantwini (2010:83) states that it would be irrational and naive to expect teachers to accept educational reforms easily without objection. This observation implies that teachers need to be trained first before a new programme is introduced. In addition, Runhare's (2010) study at the Zimbabwean school revealed that there was no systematic counselling yet the subject was supposed to be taught. The principal at this school described the counselling approach adopted as ad hoc in the following words: "The school has counsellors yes, but the counselling they know is limited. They are not professionally trained, and so one can say they just help the situation by trial and error"

(Runhare, 2010:73). My assumption with regard to teachers' ability to assist in-school OVC is that they are ill-equipped, and may need training in this regard. In such a situation, Hargreaves (2005:11) rightly observes that if teachers see through the 'smoke and mirrors' of educational reform, they will resist the change. This entails induction of teachers into new programmes before they are implemented to gain their support. Moreover Jargenson (2006:36) and Kurlaender and Flores (2005:401) underscored that teachers who understand policy reforms and innovative programmes play a critical role in determining their pedagogical practices. In view of the literature reviewed it is apparent that the teacher factor, for example, their knowledge of the subject matter, attitudes and influence is of paramount importance for

successful implementation of educational programmes. Thus the following question begs the answer: to what extent are the Zimbabwean primary school teachers knowledgeable about their roles in caring and supporting OVC?

3.13.2 The Zimbabwe Education Sector's Response to HIV/AIDS and OVC Crisis

Interventions to address challenges presented by HIV/AIDS and OVC are anchored on the 1993 policy circular for teaching HIV/AIDS curriculum (MOESAC, 2015:10; Mugweni 2012:30). This policy came into effect in 1999 and covers learners from Grade 4 to 'A' level (GoZ, 1999:7). It is a compulsory subject in the curriculum, with specific time allocated on the school time table. To prepare teachers for this subject, pre-service training is done in all teacher-training colleges and faculties of education in universities (GoZ, 1999:10). The course content for the programme covers technical aspects of HIV/AIDS; for example, causative organism, transmission and treatment. It also covers gender-based violence and participatory teaching methods (Ministry of Health and Child Welfare, 1999:6). Furthermore, each provincial office has an Education Officer responsible for HIV/AIDS, Life skills as well as guidance and counselling (MOESAC, 2015:10). The Ministry of Education has also established child-friendly schools (CFCs) which encourage children to report cases of abuse to school health officers or counsellors (MOESAC, 2015:15). This is done to minimise cases of child abuse. Schools have also established peer educational programmes like AIDS action clubs which allow children or young people to assume leadership roles (Mugweni, 2012:34). It is evident, therefore, that, in principle there are sound strategies in schools intended to assist OVC, but the question this study seeks to answer is: to what extent are these strategies translated into reality?

3.13.3 School Leadership Support of OVC Programmes

The educational manager or leader is a key person in the school charged with the responsibility of improving instruction (Bates, 1999:35). Killian (2007:47) defines leadership as "...any behavior that influence the actions and attitudes of followers to achieve certain results". In addition, Dess and Lumplin (2007:353) view leadership as the process of transforming organisations from what they are to what the leader wants them to become. In relation to the role of the educational manager or leader, Mafa, Mpofu, Chinhenga and Ncube (2013:6) stress that unless the educational manager plans for the school; there will be confusion all round. In view of the critical role the educational managers play in the implementation of educational

programmes, I contend that the responsiveness of schools to the needs of OVC hinges heavily on school leadership.

Furthermore, Mupa (2012:45) posits that the implementation of any subject in the school requires leadership commitment. He adds that teaching of life skills for the good of OVC in schools requires leaders who take up the challenge to change the existing work culture to that which is accommodative of the OVC phenomena. Notwithstanding the critical role played by school leadership, research (Naidoo; 2010:83; Runhare; 2010:264; Wood & Goba, 2011:145) indicates that most principals and governing bodies lack necessary knowledge and skills or experience to strategically plan to address the needs of disadvantaged students in a holistic manner. In the case of Zimbabwe, the introduction of the AIDS Action Programme in the curriculum in late 2003 compared to core subjects like English, Mathematics, Science and Shona (Mugweni, 2012:28) may mean that schools are not yet fully equipped to effectively implement the subject. Against this backdrop, I assume that school leadership support of school-based OVC programmes is limited.

3.13.4 School Initiatives That Promote the Well-being of OVC

Research has shown that schools are crucial institutions in addressing the needs of OVC (Naidoo, 2010; Tsheko, 2007; Wood & Goba, 2011). Activities to support OVC education should thus focus on helping them access formal education, alternative education programmes or vocational training (Ministry of Gender, Labour and Social Development, Uganda, 2005:3). Schools are viewed as safe havens, a place where OVC find friends, a place where they have hope of an education and a bright future (Naidoo, 2010:76). Teachers and other learners can help OVC financially and emotionally as illustrated by one school studied by Edwards and Sweeney (2007) in America. The school had a pilot intervention programme for OVC. The programme was multifaceted; for example, OVC were allocated a classmate who served as a peer counsellor. The peer counsellor was responsible for helping struggling learners by offering instrumental and emotional support such as food, clothing and counselling. Above the peer counsellor was a teacher who served as a mentor or confidant for the OVC. The role of the adult mentor was to provide positive reinforcement and adult support to the learners. Small group counselling was also provided to OVC. The study indicated that both teachers and learners believed that the interventions improved the well-being of OVC significantly. Against this backdrop, I contend that with proper planning and collaboration of stakeholders in education such as educational psychologists, teachers, parents and learners, schools can be

effective centres of assistance for OVC. Neswiswa (2013:28) adds that children who are empowered through education stand a good chance of being economically independent instead of being dependent on their families. Below is a suggested list of school-based intervention initiatives that schools can implement for the benefit of OVC:

- School feeding schemes through which OVC are provided with nutritious meals at different times of the day;
- Waiver of school fees for OVC;
- Counselling and support;
- Child-friendly school initiatives, for example, peer-counselling;
- Food gardens;
- Extra-curricular activities to promote healthy life styles;
- Identification of OVC;
- Enlisting the services of social development agencies, health care providers, community-based organisations, NGOs and faith-based organisations; and
- Availing school infrastructure (Classrooms) to be used after hours as bedrooms for OVC. (Martin, Mathambo & Richter 2011:16, Naidoo, 2010:110;Tsheko, 2007:79).

The school-based intervention strategies highlighted above cover the critical areas of the well-being of OVC such that if schools are empowered to fulfil these responsibilities, the lives of OVC can change positively. Furthermore, research by Martin, Mathambo and Richter (2011:17) found that school attendance, concentration and participation of learners improved in class when feeding schemes were functional. This observation is in tandem with Maslow's hierarchy of needs theory which emphasises fulfilment of physiological needs first before the satisfaction of higher needs (Berg & Theron 2009:132; Mwamwenda 2004:239). In this respect, this study seeks to find out what the situation is like in Zimbabwean rural primary schools with regard to school-based programmes targeting OVC.

3.14CHAPTER SUMMARY

This chapter situated the study within the framework of existing literature on OVC in the world. It looked at the global scale of the OVC problem in order to understand the need for the involvement of different players in addressing the needs of OVC. Literature reviewed indicates that the number of OVC is increasing, particularly in the developing world. Provisions of international conventions and declarations, such as the Convention on the Rights of the Child

(1989) were discussed to stress the need to uphold children's rights. I also explored child care theories such as Bronfenbrenner's ecological theory, the rupture and resilience theories to understand child care systems adopted by different communities. The role of the school in caring for and supporting OVC was also discussed, and it emerged that schools are wellplaced to cater for the needs of OVC, but face the challenge of ill-equipped teachers to deal with the OVC. Literature reviewed has shown that OVC confront material, psychosocial and emotional problems which can be addressed by community structures like schools. The next chapter discusses the research methodology adopted in this study.

CHAPTER 4

RESEARCH DESIGN AND METHODOLOGY

4.1 INTRODUCTION

In Chapter 3, I explored challenges confronting OVC and interventions adopted in different African countries to deal with the OVC problem. Literature reviewed indicates that OVC face a plethora of challenges which include psychosocial, emotional, educational, health and nutrition. The role of the school and the teacher in addressing the challenges confronting in-school OVC was identified as one of the key intervention strategies adopted by many countries in dealing with the OVC problem. Chapter 4 presents the methodology adopted for this study. Aspects discussed in this chapter include research paradigm, the research design, population, sample and sampling procedure. Methods of data collection employed in this study, namely in-depth interviews, FGDs and document analysis as well as data collection procedures, data analysis, trustworthiness of findings and ethical issues were also discussed in relation to the research problem. This study adopted a phenomenological research design as the design was deemed appropriate to capture the views of in-school OVC on the responsiveness of schools to their needs. A research design is a critical component of the research process in that a properly chosen design ensures that data collected enables the researcher to answer the research question. The methodology adopted in this study is represented diagrammatically on the next page.

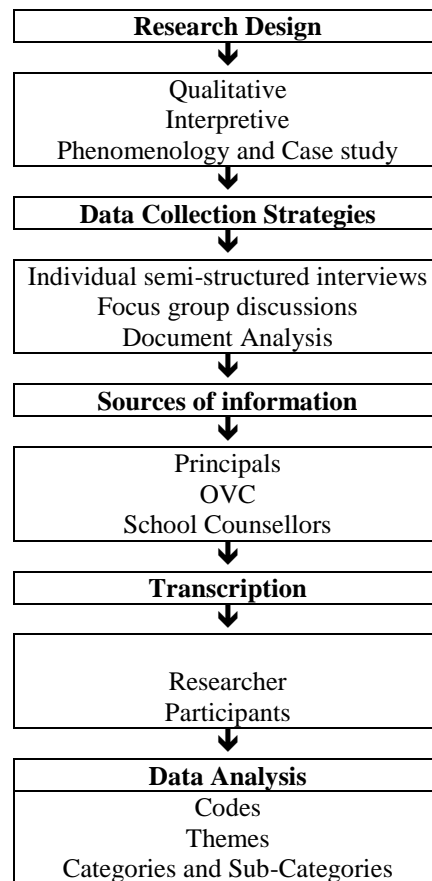


Figure 4.1: Methodology overview

Source: Adapted from Chabilall (2010:71)

4.2 RESEARCH PARADIGMS

Cohen, Manion and Morris (2011:5) state that methodology in research resides in paradigms. A paradigm is a way of looking at and understanding the world and is made up of a cluster of values, views and opinions on what criteria gives worth of something (Hart, 2012:213). In addition, Blakie (2007:3) states that paradigms provide different ways of making connections between the social experiences of people and the world with which social life occurs. Fraenkel and Wallen (2003:432) stress that the assumptions of paradigms relate to views concerning nature of reality, relationship between the researcher and the researched, role of values in a study and the process of research itself. From the above, it can be concluded that paradigms are philosophical principles that underpin people's understanding of social reality.

According to Chilisa and Preece (2005:23), paradigms define enquiry along three dimensions, namely ontology, epistemology and methodology. Mark (2010:5) adds that ontological

assumptions of the researcher inform the epistemological assumptions, which in turn, inform the methodology of the research. There are three research paradigms namely positivism, interpretivism and critical approach (Cohen et al., 2011:5). Positivists view reality and nature of knowledge differently from the way interpretivists and critical researchers do, and adopt different methods of studying social phenomenon. In this study, the researcher worked from the interpretivist paradigm following a qualitative approach.

Ontologically, qualitative researchers stress that reality consists of an individual's mental constructions of the "deeper" meanings of social actions, how these are interpreted, understood and appreciated by individuals and groups (Mark, 2010:5). The implication is that human life can only be understood from within and not as some form of external reality. To qualitative researchers, the researcher cannot be separated from the researched and the research findings are created rather than discovered. A qualitative researcher studies participants in their natural world in order to understand the phenomenon under study from their perspective. Objectivity and generalisation are not primary objectives in qualitative research (Maree, 2012:54).

The basis for employing a qualitative research design was that the researcher wanted to gain a deep understanding of the lived experience of in-school OVC; hence, the qualitative approach which offers the researcher the opportunity to be part of the participants and view the situation from an emic perspective. The following section discusses the philosophical underpinnings of the qualitative, quantitative and critical research paradigms and emphasises the advantages of selecting the qualitative paradigm.

4.2.1 Positivist Paradigm

The quantitative approach is associated with the philosophy of positivism. The exponent of the philosophy of positivism is the 19th Century Sociologist August Comte (1798-1857) (Frankel & Wallen, 2003: 432). In 1824, Comte wrote, "I believe that I shall succeed in having it recognised that there are laws well defined for the development of the human species" (Frankel & Wallen, 2003: 432). Comte further argued that the positive stage of human knowledge is reached when people begin to rely on empirical data, reason and development of laws to explain phenomenon (Cohen, Manion & Morrison, 2011:7). The influence of positivism on social science research was speeded up by the *Vienna Circle* introduced in 1929 with a manifesto entitled *The Scientific World View* (Hart, 2012: 201). The Vienna Circle was a European philosophical movement led by Ernst Mach, Maritz Schlick and Rudolf Carnap (Hart, 2012: 201).

The basic premise of positivism is that there exists a reality out there independent of us, waiting to be discovered by use of stable natural laws (Fraenkel & Wallen, 2003: 432; Hart, 2012: 126). The general assumption of positivists is that common-sense; everyday knowledge and understanding are flawed because they are not systematic and free from values (Cohen, Manion & Morrison, 2011:7; Hart, 2012: 197). Positivists argue that the observer must stand apart and take a detached and neutral view of phenomenon under study. They further advance that science provides the clearest possible ideal of knowledge (Cohen, et al., 2011: 7; Walliman, 2004: 59).

4.2.1.1 Critical research paradigm

The critical paradigm is associated with the institute for social research founded by Adorno, Marcuse and Horkheimer (Martens, 2008:42). It is also influenced by the work of Habermas (1972:23) and Freire (1996:31) who claim that liberation is thus childbirth, and a painful one. To critical researchers, social reality is historically constituted and is produced and reproduced by people (Denzin & Lincoln, 2005:25). Ontologically, reality is described within a political, cultural, historical and economic context. The transformative emancipatory ontology assumes that there are diverse viewpoints with regard to social realities (Mertens, 2008:88). Epistemologically, critical researchers emphasise the importance of the interactive relationships between the researcher and the participants and the impact of social factors that influence them. Methodologically, critical researchers employ participatory and emancipatory methods (Creswell, 2009:9). Thus, Carr and Kemmis (1986:149) define critical science theory as a process of reflection which requires the participation of the researcher in the social action being studied. Critical educational science must therefore be participatory which implies the active roles of participants. Although the critical paradigm has some common elements with the interpretive paradigm such as participation of the researched in the research process, this study adopted the interpretive paradigm. The following section focuses on the interpretive paradigm, its characteristics and suitability to the current study.

4.2.2 Interpretivist Paradigm

Interpretivism has its roots in hermeneutics, the study of the theory and practice of interpretation (Maree, 2012:58). This paradigm was developed in the 19th Century as a philosophical theory of meaning and understanding (ibid.: 58). Contrary to the scientific view of positivists, interpretivists advocated for a more ‘artistic’ approach to research (Fraenkel & Wallen, 2003:433). According to interpretivists, social reality is viewed by multiple people with

multiple perspectives of reality (Mark, 2010:7). Interpretivists maintain that humans are inextricably bound up with the events of the world and that it is impossible for anyone to stand aside and observe it impartially as it were “from on high” (Walliman, 2014:60). Thus, interpretivists seek to understand phenomena through the meanings people assign them. Walliman (2014: 60) argues that the interpretive paradigm is particularly relevant when studying anything to do with human society. He suggests that the scientific method is poorly equipped to track the inconsistencies, conflicts and subtleties of beliefs, ideas and feelings that form part of human life (Maree, 2012:59; Walliman, 2014:60). The researcher, motivated by Walliman’s observation on limitations of the scientific method in studying human life, chose the interpretive paradigm since it emphasises the researcher-researched interaction to gain a thick description of participants’ views on the phenomenon under study. Thus, in this study, the researcher interacted with OVC in their school environments in order to gather information on challenges they confront.

4.2.2.1 Assumptions of the interpretivist paradigm

The interpretivist paradigm is underpinned by five assumptions: human life can only be understood from within; social life is distinctively human product; the human mind is the origin of meaning; the social world does not exist independently of the human mind; and human behaviour is affected by knowledge of the social world (Maree, 2012:59). The following section examines the aforementioned assumptions of interpretivism.

- Human life can only be understood from within. Interpretivists maintain that human life cannot be understood when the researcher is detached from the participants under study (Maree, 2012: 59; Chromo, 2006:8). Interpretivism, therefore, focuses on people’s subjective experiences, and how people construct their social world (Maree, 2012:59; Walliman, 2014:60). Guided by this assumption, I used interviews, FGDs and document analysis which gave me the opportunity to interact with OVC in their natural setting and see their situation from an insider’s perspective.
- Social life is a distinctively human product. Interpretivists believe that reality is not objectively determined, but socially constructed. On this basis, they maintain that reality must be studied holistically and not in isolation from its natural context in which it occurs (Cohen, et al., 2011:6; Maree, 2012: 69). In this study, the researcher approached the study sites with no predetermined theories or hypothesis to prove, but observed and listened to

the meanings participants gave to their activities in order to gain a deep understanding of how schools assist OVC.

- The human mind is the purposive source or origin of meaning. Interpretivists maintain that knowledge is personal, subjective and unique (Cohen, et al., 2011:7), and because of that, they seek to understand the meanings imparted by people to phenomena and their social context. Cognisant of the fact that knowledge is a social construct, the researcher employed methods of data collection like in-depth interviews that generate primary data, so that the situation of OVC in schools is understood from the perspective of the participants – an emic perspective.
- The social world does not exist independently of human knowledge. Interpretivists assume that to conceive the world as external and independent from the human mind is to ignore the subjectivity of human endeavours. Thus, in this study, the researcher employed both interactive and non-interactive methods of data collection with a view to understanding challenges encountered by in-school OVC from the perspective of participants.
- Human behaviour is affected by knowledge of the social world. Interpretivists propose that there are multiple realities of a phenomenon (Maree 2012:60). Chilisa and Preece (2005:28) add that interpretivists believe that reality is socially constructed and that it is time, space and context-bound. Against the assumption that reality is socially constructed and context-bound, I approached the study of OVC with no preconceived ideas as to the challenges confronting them in school but listened to them as they expressed their views on their situation.

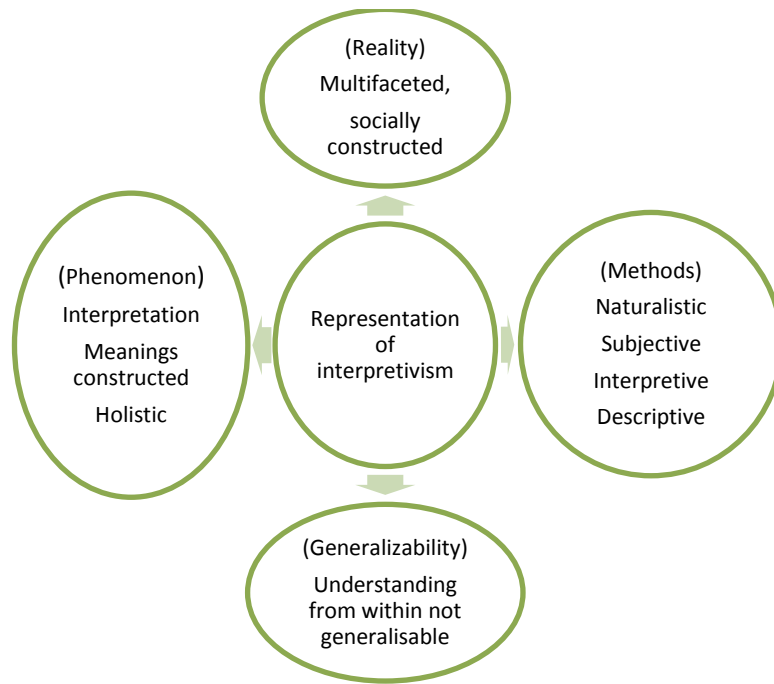


Figure 4.2: Representation of interpretivism

Source: Adapted from Maree (2012:61)

4.2.3 Qualitative Research

Since my research sought to explore the participants' views on the responsiveness of rural primary schools to the needs of in-school OVC, I chose the phenomenological research design (Cohen et al., 2011:289; De Vos et al., 2011:325; McMillan & Schumacher, 2010:323). Sidhu (2003:111) suggests that studies which deal with human behaviour are best studied qualitatively since it is difficult to quantify human behaviour. In addition, Chilisa and Preece (2005:140) state that qualitative research methods by their nature create space for marginalised voices because research is carried out about people's experiences in the natural settings in which these experiences occur. Since this study focuses on the situation of OVC, who is part of the marginalised section of the population, the qualitative approach was found appropriate to gain a holistic understanding of their circumstances. According to Yin (2011:8) and Creswell (2009:175), the emphasis in qualitative research is to study things in their real-life world with a concern for gaining in-depth understanding of phenomena of interest. In this study, the conditions under which the data were collected were free from human manipulation; that is, participants were not subjected to artificial conditions. Some scholars (Johnson & Christensen, 2008:389; McMillan & Schumacher, 2010:322) argue that human behaviour is best understood

when studied as it naturally occurs, without intervention, manipulation, control or any externally imposed constraints.

Furthermore, Chromo (2006:8) characterised the qualitative approach as follows:

- Research involves holistic inquiry and is usually carried out in a natural setting.
- Humans are the primary data-gathering instruments.
- Emphasis is on qualitative methods.
- Usually purposive rather than random sampling is needed.
- Data is analysed inductively.
- There is development of grounded theory.
- The research design emerges as the research progresses.
- The participants in the study play a role in interpreting the research outcome.

This study adopted a qualitative approach using qualitative methods in natural settings framed within an interpretive paradigm (Creswell, 2007:212; De Vos, et al., 2011:235) in order to solicit views of participants on the responsiveness of schools to the needs of OVC. The following section focuses on ontological and epistemological issues in research.

4.3 ONTOLOGICAL AND EPISTEMOLOGICAL ISSUES

Ontology and epistemology are critical concepts in research for they inform methodology researchers normally adopt. The following section will distinguish the two concepts and how interpretivists view ontology and epistemology.

4.3.1 Ontological Issues and Research

Ontology refers to the nature of reality or of a phenomenon (Cohen, *et al.*, 2011:33). Maree (2012:51) defines ontology as the study of nature of reality. It relates to that body of knowledge that deals with the essential characteristics of what it means to exist (Chilisa & Preece, 2005:5). Interpretive researchers argue that the subjective view of the world is made up of names, concepts and labels that are social and historical creations (Maree, 2012:54). Ontologically, qualitative researchers stress that reality consists of individual mental constructions of ‘deeper’ meaning of social actions, how these are interpreted, understood and appreciated by individuals and groups (Chilisa & Preece, 2005:29; Maree, 2012:54).

The implication is that human life can only be understood from within and not as some form of general reality. To qualitative researchers, the researcher cannot be separated from the researched and that research findings are created rather than discovered (Cohen, et al., 2011:7; Maree 2012:54). This study adopted an interpretivist ontological position which emphasises the fact that there are multiple realities; hence the researcher was immersed in the study context to appreciate the subjective views of participants regarding the well-being of in-school OVC.

4.3.2 Epistemological Issues and Research

Epistemology is a branch of philosophy that studies issues related to knowledge (Chilisa & Preece, 2005:25; Maree, 2012:54). Hart (2011:203) contends that epistemology is the study of and debates about ways in which people know things and have knowledge. He further argues that epistemologists are classified into two categories, that is, empiricists like Locke, Berkley and Hume, and rationalists such as Plato and Descartes. Epistemology looks at how one knows reality, the method of knowing the nature of reality or how one comes to know reality (Maree, 2012:55). It assumes a relationship between the knower and the known (Cohen, et al., 2011:6). In this study, I adopted the interpretivist epistemology on the basis that the research is on human beings and adopting a scientific method which emphasises detachment of the researcher from the researched was found unsuitable to address the research objectives.

The interpretivist epistemology emphasises that knowledge is personal, subjective and unique (Cohen et al., 2011:15; Punch, 2011:178), and that precise, systematic and critical answers to complete human problems are not possible. Interpretivist researchers believe that the world is made up of people with their own assumptions, intentions, attitudes, beliefs and values. To interpretivists, to know reality, the researcher must not be detached from the participants under study (Chromo, 2006:8; Cohen et al., 2011:7; Gary, 2014:385).

Interpretivists argue that the individual's behaviour can only be understood by the researcher sharing their frames of reference (Chromo, 2006:6). This implies that the researcher needs to understand the meanings participants give to their actions. They further assert that understanding of individuals' interpretation of the world around them has to come from the participants as they interact with the researcher (Cohen et al., 2011:7, Maree, 2012:51). Guba and Lincoln (2010:34) add that in social inquiry, subjective knowledge produces a subjective relationship between elements of the inquiry. They conclude that knowledge is subjective since it is generated through observations made subjectively by a human observer (Maree, 2012:56). The researcher found the interpretivist epistemology suitable for unpacking the life experiences

of OVC in the school context. The methodological design and data-gathering instruments, such as in-depth interviews, FGDs, document analysis and observation adopted gave the researcher an opportunity to interact with OVC, school counsellors and school administrators to gain a deeper understanding of the role of schools in addressing the needs of OVC.

4.4 RESEARCH DESIGN

Chiromo (2006:29) defines a research design as an overall plan for collecting data in order to answer research questions. Research design refers to the structure of an inquiry (Yin 1989:29). A research design is of crucial importance in the research process as it gives the researcher the roadmap for carrying out the study. As Yin (1989:29) states, its main function is to ensure that evidence obtained enables the researcher to answer the initial question as unambiguously as possible. When designing research, researchers need to ask the following question: what type of evidence is needed to answer the question in a convincing way? (Burns & Grove, 2003:195). To address this question, researchers should be guided by research designs. In this regard, Chiromo (2006:29) states that a good research design is flexible, appropriate, efficient and economic.

This study examines the responsiveness of Zimbabwean rural primary schools to the needs of in-school OVC. The researcher chose a qualitative research design, namely phenomenology and case study. The following section discusses the phenomenological research design and case study as well as their suitability to the current study.

4.4.1 The Phenomenological Research Design

The researcher chose the phenomenological research design for this study. Hart (2012:211) views phenomenology as programme that aims to empirically investigate all forms of activity in everyday life. Haralambos and Holborn (2008:794) view phenomenology as the study of lived human phenomena within everyday social contexts in which the phenomena occur from the perspective of those who experience them. Merriam (2009:26) adds that phenomenological research is suited for studying affective, emotional and often intense human experiences. The phenomenological research design was adopted in this study, because its central tenets are compatible with my research in that it emphasises understanding of the subjective experiences of participants. This study aims to elicit information from participants on the well-being of in-school OVC. Phenomenological methods are effective at bringing to the fore, the experiences and perceptions of research participants from their own perspectives (Emic) (Seruwagi,

2012:82). Data in this study were collected through in-depth interviews, FGDs and document analysis. Through these data collection instruments, the researcher gained some insights into the world of in-school OVC.

Edmund Husserl (1859-1938) is the founding father of phenomenology (Cohen, et al., 2011:18; Fraenkel & Wallen, 2003:437). Husserl was concerned with the way social scientists of his time were conducting research. He observed that scientists were imposing their own theories on the topics they were studying in a premature way (Seruwagi, 2012:81). Husserl argued that science needs to try to set aside preconceptions and describe how phenomena appear to human consciousness (Chilisa & Preece 2005:142; Fraenkel & Wallen, 2003:438). His catch word was 'back to the things themselves' which, for him, meant finding out how things appear to the people involved rather than imposing meaning from outside; the etic perspective (Cohen, et al., 2011:18). He advances that only through such careful description could a firm foundation for scientific investigation be built. To achieve this goal, Husserl emphasised that researchers must look beyond the details of everyday life to the essence or structures underlying phenomena under study (Fraenkel & Wallen, 2003:437; Hart, 2012:211). Thus, the researcher, in this study, examined the relationship between the school, the family and the wider society (the essence) in order to understand the phenomenon under investigation, the well-being of in-school OVC.

To Husserl, the search for the essence of an experience is the cornerstone, the defining characteristic of phenomenological research (Groenwald, 2004:25). To get to the essence of social phenomenon, Husserl exhorted researchers to set aside or "bracket" their assumptions about the phenomenon under study and attempt to see it afresh (Cohen et al., 2011:18; Fraenkel & Wallen, 2003:427). The process of recognising and setting aside the taken-for-granted ways of seeing the world suggested by Husserl is known as 'epoche' (Mark, 2010:7; Walliman, 2014:60). Seruwagi (2012:82) states that by using the phenomenological method, researchers are able to describe the essence of any particular phenomenon by stripping off the cultural preconceptions through which it is normally seen. By adopting the phenomenological research design for this study, the researcher wanted to get to the essence of the life world of in-school OVC. Phenomenological research is concerned with understanding of social and psychological phenomenon from the perspective of people involved. Groenwald (2004:15) adds that the researcher's epistemological position in phenomenological research is that data are contained within the views of people experiencing the situation, thus, in this study, the researcher collected data from OVC through FGDs to understand the situation of in-school OVC from

their perspective. Cohen, et al. (2011:18) identified distinguishing philosophical viewpoints of phenomenologists as follows:

- A belief in the importance and in a sense the primacy of subjective consciousness;
- An understanding of consciousness as active, as meaning-bestowing; and
- A claim that there are certain essential structures to consciousness of which researchers gain direct knowledge by a certain kind of reflection.

Griffiths (2009:46) adds that the task of phenomenology is to identify the subjective experience, describe it and thus understand it. To achieve this goal, phenomenological researchers employ a method of inquiry which involves a mode of data collection and analysis that presents the participants' experiences from their perspective (Smith & Osborn 1999:53). A method of inquiry that phenomenological researchers normally adopt is Interpretive Phenomenological Analysis (IPA). In this study, the researcher employed IPA to understand the meanings participants assigned to the experiences of in-school OVC. The section below discusses IPA and its relevance to the current study.

4.4.1.1 Interpretive phenomenological analysis

IPA was developed by Jonathan Smith (1996) to allow rigorous exploration of idiographic subjective experiences and social cognitions of participants (Bigger-Staff & Thompson, 2008:214-224; Griffiths, 2009: 49). The researcher adopted IPA in this study, because the aim is to explore in detail how participants make sense of their personal social world; that is, the researcher intended to get the views of OVC, school counsellors and school heads on the well-being of in school-OVC. Smith (1996) argued that IPA is informed by two theoretical touchstones namely phenomenology and symbolic interactionism. Phenomenology and symbolic interactionism hold that human beings are not bystanders in an objective reality but are active beings who formulate their own biographical stories by interpreting and understanding the world around them (Griffiths, 2009:50). Symbolic Interactionists maintain that the meanings individuals assign to events are of central importance to the researcher and that the meanings participants assign to events can only be accessed through a process of interpretation (Bigger-Staff & Thompson, 2008: 224; Haralambos et al., 2008:794). The researcher thus did not trivialise responses from the OVC but made an effort to understand the meanings attached in order to conceptualise their world. The aim of IPA is to understand the participant's view of the world and associated cognitions in order to gain the insider's

perspectives of the phenomenon under study (Bigger-Staff & Thompson, 2008:224;Griffiths, 2009:51). Smith and Osborn (2007:53) stress that IPA is concerned with trying to understand what it is like, from the point of view of participants. The researcher therefore employed IPA in this study, to explore the lived experiences of OVC because of its robustness in seeking to understand the phenomenon under study from the point of view of the participants.

4.4.1.2 Characteristics of IPA

IPA has three main characteristics, namely idiographic, inductive and integrative (Griffiths, 2009:53; Seruwagi, 2012:83; Smith & Osborn, 2007:53).IPA is idiographic in the sense that it focuses on the individual's personal experiences of the social world (Smith & Osborn, 2007:53). In an idiographic study, emphasis is on the examination of individual cases and specific statements can be made about the individual cases studied. This study leans more on idiographic phenomenology because of its emphasis on analysing the rich, lived account of an individual's social world (Seruwagi, 2012:83). The researcher was motivated to employ IPA because of its focus on idiographic data, which the researcher considered valuable to understand the life world of in-school OVC. Smith and Osborn (2007:53) emphasised that IPA is a suitable approach when one is trying to find out how individuals perceive particular situations they are facing.

Another characteristic of IPA is that it is inductive. It employs techniques which allow for unanticipated themes to emerge during analysis (Griffiths, 2009:54; Seruwagi, 2012:82). It does not test hypotheses, and prior assumptions are avoided. Thus, IPA does not involve generating specific hypothesis based on existing literature but generates broad research questions which lead to collection of expansive data (Bigger-Staff& Thompson, 2008:214Smith & Osborn, 2007:53).IPA is also interrogative in character. One of the central aims of IPA is to contribute new knowledge to the existing body of literature (Griffiths, 2009:54; Smith & Osborn, 2007:53). It has been acknowledged that although IPA involves in-depth analysis of small samples, the results can still be discussed in relation to the situation of similar cases. Thus, the study of the situation of in-school OVC in the three selected schools may give an overview of the situation of OVC in related schools.

4.5 THE POPULATION

Shastri (2008:116) defines a population as an entire group of persons or elements that have at least one thing in common. Research population refers to the pool or group of people where

the research sample is selected (Ary et al., 2009:272). Chiromo (2006:17) views population as the entirety of individual 'units' objects or events that will be considered in a research. This study focused on the responsiveness of rural primary schools to the needs of in-school OVC. The target population for this study comprised all OVC in Grade 7 at the three sampled schools. My assumption in choosing OVC in Grade 7 was that these pupils have been in school for a relatively long period of time compared to those in lower grades; hence, they could provide the researcher with relevant and adequate data to address the research objectives. Another reason for selecting OVC in Grade 7 was that at this level, they were considered educated and old enough to comprehend interview questions better.

The target population for this study comprised 70 OVC learners in Grade 7 at the three selected schools, principals and school counsellors. The total population for this study was 79. From the target population of 79, a sample of 24 participants was purposively drawn, comprising 15 OVC, five from each school, six school counsellors and three principals. By drawing such a heterogeneous sample, the researcher wanted to triangulate data relating to the challenges confronting in-school OVC and enhance validity of data (Haralambos, et al., 2008:846; Maree, 2012:79).

4.6 THE SAMPLE

Chiromo (2006:16) defines a sample as a group or sub-set of the population selected from the population. Haralambos et al., (2008:817) view a sample as a part of a larger population. They further state that those included in the sample are chosen as a cross section of the larger group. Furthermore, Bless and Higson-Smith (2010:85) define a sample as a sub-set of the whole population which is usually investigated by a researcher and whose characteristics are generalised to the entire population. However, the aim of this study was not to generalise findings but to study in detail the welfare of in-school OVC in the selected schools.

In this study, a sample of 24 participants was purposively sampled. By selecting principals and school counsellors, I assumed that they were key informants since they interacted with OVC more often in schools as problems and issues affecting OVC are normally handled by school-counsellors who will report the issues to the principals and, if need be, to the District Education Officer for guidance and counselling.

4.6.1 The Sampling Technique

In line with qualitative methodology, I made use of non-probability sampling techniques, namely purposive sampling and key informant sampling (De Vos et al., 2011: 394; Gray, 2014: 217).

4.6.1.1 Purposive sampling

Gray (2014:217) asserts that the approach to sampling is one of the most distinguishing features between qualitative and quantitative research. He further notes that quantitative research relies on large samples while qualitative research uses small samples or even cases selected purposefully on the basis that they are information-rich. After being granted permission to carry out the study in the selected schools by the Ministry of Primary and Secondary Education, principals and the UNISA College of Education, I requested the OVC statistics in the selected schools. From the list of OVC accessed at each school, the researcher picked all OVC who were in Grade 7 and gave them consent letters for parents or guardians to sign. After a day, I returned to collect the signed consent letters and, in line with Gray (2014:217), purposively selected five OVC in each school from those whose parents or guardians agreed to have their children participate in the study. In purposive sampling, the researcher handpicks the cases to be included in the sample (Chiromo, 2006:18; Haralambos, et al., 2008:846). The 15 OVC sampled were selected on the basis of the researcher's judgement of their typicality (Chiromo, 2006:18; Fraenkel & Wallen, 2003:439). Purposive sampling is also called judgemental sampling (Rubin & Babbie, 2008:247). This is because the sample is based on the judgement of the researcher. De Vos et al.(2011:392) posit that, in purposive sampling, the researcher must think critically about the parameters of the population and choose the sample accordingly. Informed by De Vos et al.(2011:392), I purposively sampled boys and girls so as to represent the parameters of the population adequately. I purposively selected participants that I deem would inform an understanding of the research problem of the study. In addition, Denzin and Lincoln (2011:30) state that the overall purpose of the use of sampling techniques in qualitative research is to collect the richest data.

4.6.1.2 Types of purposive sampling

There are a variety of purposive sampling techniques which include typical case, maximum variation, homogenous, stratified purposeful, random purposeful, unique case, critical case sampling (De-Vos et al., 2011:392; Frankel & Wallen, 2003: 439; Gary, 2014:218). In this

study, a selection of 15 OVC from the three schools was done through random purposive sampling technique.

- Random purposive sampling

Gray (2014:220) contends that random purposive sampling is used when there is a very rich pool of potentially information-rich cases available and no obvious reason for choosing one case above another. Informed by Gray (2014:220), I adopted random purposive sampling in selecting five OVC from each school since the number of OVC at each of the three schools was quite substantial. Randomly selecting small samples, for example, five OVC per school was done to increase the credibility of the study since the approach minimises researcher bias in sampling (Patton, 2002:169). The researcher coded the OVC in Grade 7 at the sampled schools with numbers. Codes were written on pieces of paper and put in cardboard boxes. Two cardboard boxes were used, one for boys and another one for girls. The researcher shook the cardboard boxes to mix the papers and then picked a paper. The exercise was repeated until five OVC had been selected at each of the selected schools.

The advantage of random purposive sampling is that the participants are selected in advance; hence, there is some evidence of planning rather than just serendipity (Gray, 2014:229). In addition, Chiromo (2006:18) posits that the advantages of non-probability sampling are convenience and economy. The convenience of purposive sampling is hinged on the fact that the researcher selects participants who are deemed information-rich. In the same vein, Lewis and Sheppard (2006:180) argue that purposive sampling can be more realistic than other sampling methods in terms of time, effort and cost needed in finding informants. In view of the aforementioned advantages of purposive sampling, choosing the technique was fundamental in this study, since the researcher judgementally chose information-rich participants. Despite the aforementioned advantages of purposive sampling, the technique has disadvantages that researchers adopting it should note. Purposive samples are highly prone to researcher bias (Borg & Gall, 2009:85; Haralambos, et al., 2008:819). In addition, Gray (2014:217) points out that in purposive sampling, the researcher may omit a vital characteristic for selecting a sample, or may be subconsciously biased in selecting the sample. Bias in purposive sampling is likely because the sample is based entirely on the judgement of the researcher (De Vos et al., 2011: 392; Haralambos, et al., 2008:819).

In this study, the problem of researcher bias associated with purposive sampling was circumvented by adopting purposive random sampling which is similar to probability sampling

techniques that were designed to reduce such biases (Chinyoka, 2013:130; Gray, 2014: 220). In trying to reduce researcher bias, the researcher took cognisance of a caution made by De Vos et al. (2011:392) that in purposive sampling, the researcher must think critically about the parameters of the population and choose the sample case accordingly.

- Key informant sampling

In this study, the key informants sampled were three school principals of the selected schools and six school counsellors, two from each school. Besides being granted permission to carry out the study in schools by the Ministry of Primary and Secondary Education and the Provincial Education Director (PED) Masvingo, I also applied for permission from the rural primary school principals to carry out the study. The researcher then purposively selected three schools from those that agreed to have the study conducted. School principals and counsellors in the three selected schools signed informed consent forms before the study was conducted. According to Marlow (2005:145), key informant sampling relies on people in the community identified as experts in the particular field of interest. This study seeks to find out the responsiveness of rural primary schools to the needs of OVC. De Vos et al.(2011:394) maintain that the strategy in key informant sampling is to interview the identified experts systematically on the phenomenon under study. School principals and school counsellors were deemed knowledgeable in OVC-related issues to provide relevant data to address the research objectives. The limitation of key informant sampling is that like other non-probability samples, the outcome does not permit statistical generalisation in the way that quantitative studies would achieve (Chiromo, 2006:18; Gray, 2014:220). In addition, Frankel and Wallen (2003:412) posit that one of the limitations of qualitative research is that there is seldom methodological justification for generalising the findings of a particular study. However, the strength of key informant sampling in this study, was that it allowed an in-depth exploration of issues affecting in-school OVC from information-rich participants (Gray, 2014: 317; Maree 2012:79). Since this study is qualitative and used purposive sampling, the researcher was aware that results could not be generalised because of the small size of the sample. Furthermore, the focus in qualitative research is not to generate generalisable data but to produce a thick description of a phenomenon under study (Punch, 2011:187), in this case the well-being of in-school OVC.

4.7 DATA COLLECTION PROCEDURE

Cohen et al. (2011:81) state that before data are collected, the researcher must follow appropriate procedures to gain “official permission to undertake research in the target

community.” Informed by Cohen et al. (2011:81), the researcher sought permission to carry out the study in the three selected primary schools to the Permanent Secretary, Ministry of Primary and Secondary Education. After permission was granted by the secretary, I applied to the PED, Masvingo Province for permission to conduct the study. Permission was also sought from principals of the selected schools. Lastly, before the study could commence, I applied for ethics clearance at the College of Education, UNISA and this was granted.

4.8 DATA COLLECTION METHODS

The researcher employed FGDs to collect qualitative data from learners (OVC). Hesse-Biber and Leavy (2006:197) view focus groups as an important tool for accessing the experiences and attitudes of marginalised and minority groups, including racial ethnic minorities, women, children, and the mentally and physically challenged. De Vos et al., (2011:361) define a FGDs as a carefully planned discussion designed to obtain perceptions on a defined area of interest in a permissive non-threatening environment. In this study, I conducted FGDs to elicit views of in-school OVC on their lived experiences. FGDs were chosen as the most appropriate strategy for gathering data from OVC on the basis that the technique produces data rich in detail (Fraenkel & Wallen, 2003:461, Grey, 2014:402; Maree, 2012:90). In addition, Punch (2011:171) states that focus groups are more ‘naturalistic’, closer to the real social life than one-to-one interviews. Furthermore, Haralambos et al.(2008:828)recommend FGDs, and indicate that the method often leads to greater probing of why people feel the way they do than is achieved by the individual interview. They elaborate that the technique offers the researcher the opportunity to study the ways in which individuals collectively make sense of a phenomenon and construct meaning around it. Three FGDs were held, one at each of the selected schools. The interviews were conducted in natural settings of the school such as the library and classrooms; this was done to enhance realism. I used techniques such as probing, clarification and paraphrasing of questions in order to direct the discussion and fully explore the OVC’s perceptions on the responsiveness of schools to their needs (Chinyoka, 2013:120). The researcher recorded the group interviews with a digital audio-recorder to capture participants’ responses verbatim. To cater for the inadequacies of the digital audio- recorder in capturing visual aspects of the situation such as gestures and facial expressions, I jotted down field notes. Before the commencement of group interviews, I explained to the participants the purpose of the study and assured them that the research would be carried out in line with research ethics such as confidentiality, anonymity and informed consent (Chiromo, 2006:10-11).

Maree (2012:90) highlights distinguishing features of FGDs as follows:

- The discussion is focused on a particular topic.
- Debate and conflict are encouraged and group dynamics assist in data generation.
- Group forces and dynamics are an integral part of the procedure with participants engaged with each other rather than directing comments to the moderator.

Informed by Maree (2012:90), the researcher met participants before the commencement of interviews and outlined some ground rules for the FGDs to proceed logically. The researcher made it clear to participants that the purpose of the study was to determine the responsiveness of schools to the needs of in-school OVC; this was done to clear suspicion on the part of participants as to the purpose of the research and also to focus the attention of participants on the topic under study. I also informed the participants at the start that, in group interviews, there were no right or wrong answers, all answers were valuable, this was done to motivate all members to participate freely in the discussion. Participants were advised to sit in a horse-shoe shape which allowed them to interact with each other in a relaxed and comfortable setting. The researcher also highlighted that one person would be allowed to talk at a time while others were attentive but emphasised the fact that members were allowed to ask questions or comment on each other's views or experiences.

In a focus group discussion, a facilitator or moderator guides the interview, while small groups of between 4-8 (Frankel & Wallen, 2003:461) or 6-10 (De Vos et al., 2011:366) interact. In this study, three FGDs were conducted with five OVC at the selected schools. The researcher was the facilitator or moderator in all the FGDs. In deciding on the number of participants in each focus group, the researcher was guided by Morgen and Kruger's (1998:71) caution that a decision on the right number of participants means striking a balance between having enough people to generate a discussion and not having so many people that some feel crowded out. In this study, focus groups of five OVC were considered big enough to engage the participants in discussions that yield desired information.

4.8.1 Advantages of FGDs

FGDs have a number of advantages as a data-gathering tool:

- In FGDs, participants are able to build on each other's ideas to provide an in-depth view not attainable from individual interviews.

- Unexpected comments and new perspectives can be explored easily with the focus group and can add value to the study.
- Have the ability to produce concentrated amounts of data on the topic of interest.
- It relies on interaction in the group to produce the data.
- The synergy of the group has the potential to uncover important constructs, which may be lost with individually generated data.
- They create a fuller, deeper understanding of phenomenon being studied (Kingry et al., 1990:125) and stimulate spontaneous exchange of ideas, thoughts and attitudes in the security of the crowd (Nyamathi & Shuler, 1990:128).

The researcher exploited the advantages of FGDs to gather qualitative data to address the research objectives of the study. In this study, the researcher allowed OVC to talk to each other, asking questions and exchanging ideas as well as commenting on each other's views. This generated rich data on the well-being of in-school OVC.

4.8.1.1 Limitations of FGDs

Notwithstanding the advantages of focus groups in qualitative research, the strategy has some limitations which the researcher noted so that the quality of data gathered is not compromised. The limitations of the strategy are as follows:

- FGDs can be costly and require researchers who are skilled in group processes.
- Focus group discussion samples are typically small and may not be representative.
- Participants must be able to congregate in the same place at the same time, which is difficult if the participants live in geographically distant regions.
- The information collected may be biased through group processes such as domination of discussions by more outspoken individuals (Maree, 2012:91).

The researcher made efforts to minimise the impact of the limitations on the quality of data collected; for example, the problem of geographically dispersed participants was dealt with by conducting FGDs at selected schools, while bias brought about by outspoken individuals was circumvented by the facilitator by ensuring that each participant was accorded the opportunity to express his or her views on the phenomenon under study. This was also highlighted in the ground rules outlined to the participants by the researcher before the start of the FGDs.

4.8.1.2 Number of FGDs

The number of focus group meetings a researcher should conduct varies depending on the research aims and purpose of the study (De Vos et al., 2011:366). On the same issue, Kingry et al. (1990:124) suggest four group meetings with re-evaluation after the third group meeting. In this study, one focus group discussion was held with each group, so that all in all, three FGDs were held. The researcher held one focus group discussion with each group in view of the fact that the groups were small that each member in the group could get a chance to express his or her views on the topic under investigation. Furthermore the researcher extended time allocated for the interviews to allow participants to exhaust points. FGDs were terminated when no more new information was forthcoming. Morgen and Kruger (1998: 83), however, maintain that there is no hard and fast rule determining the number of focus group meetings in a study. They cautioned that conducting too few meetings may result in something being missed or may lead to premature conclusions, while doing too many group meetings is a waste of time and money. The researcher considered such concerns when he settled for one focus group meeting with each of the three groups of OVC.

4.8.2 The Interview

In-depth interviews were conducted with two categories of participants, namely three school principals and six school counsellors. In this study, the researcher used an interview guide not as a prescriptive device (Punch, 2006:171), but to focus the interview on areas of interest. Borg and Gall (1989:451) add that interview guides enable researchers to obtain data required to meet specific objectives of the study. Although an interview guide is a list of questions guiding the researcher on what to ask respondents, it gives the researcher the latitude to pursue a range of topics. In this study, the researcher used the interview guide mindful of the temptation to impose his opinions on the respondents. Interviews with school principals were conducted in their offices after work while interviews with school counsellors were conducted in the staffroom after work when some members of staff vacated the rooms. In all cases, the researcher explained the purpose of the interview to the participants to instil trust and confidence in them. The interviews were recorded with a digital audio-recorder; this was done with the consent of participants. The digital audio-recorder was used to ensure that participants' responses were captured verbatim.

Marshall and Rossman (2008:55) contend that a study focusing on individual lived experiences typically relies on in-depth interviews. The object of this study was to explore the

responsiveness of rural primary schools to the needs of in-school OVC; hence the use of in-depth interviews was deemed appropriate to gather data from key informants like school principal and school counsellors who interact with OVC regularly. Boyce and Neale (2006:3) define in-depth interviews as a qualitative approach that probes deeply to discover information from the point of view of participants. Furthermore, Groenwald (2004:102) remarks that an interview “is literally an ‘inter-view’, an interchange of views between two persons conversing about a theme of mutual interest where the researcher attempts to understand the world from the participants’ point view”. Thus, in this study, the researcher sought to solicit views of participants on the well-being of in-school OVC. It can be drawn from Groenwald’s explanation that an interview is reciprocal in that both the researcher and the researched are engaged in a dialogue to generate thick descriptions of the phenomenon under study. In this study, the researcher allowed participants to give as much information as possible on the well-being of OVC without dominating the interview process. Here and there, I probed interviewees for clarity on certain issues (De Vos, et al., 2011:248; Maree, 2012: 88). In addition, in-depth interview are recommended as the best tool to collect data from individuals in a natural way (Best & Khan, 2003:268; Boyce & Neale, 2006:268). More so, Tuckman (2012:216) views an interview as a way of getting data about people by asking them, rather than observing their behaviour. He further contends that it finds out what is “inside a person’s head”. In the context of this research, in-depth interviews were conducted with school principals and school counsellors on the challenges confronting in-school OVC and the role of schools in ameliorating them.

De Vos et al. (2011:248) view an in-depth interview as a “conversation with a purpose”. They explain that it is focused and discursive and allows the researcher and participants to explore an issue. Thus, in-depth interviews were employed to determine school principals and school counsellors’ perceptions, opinions and reactions to the situation of in-school OVC in selected schools. Similarly Grey (2014:386) support the use of in-depth interviews in phenomenological research indicating that they allow for probing of views and opinions where it is necessary for respondents to expand on their answers. Probing allowed the researcher to direct the interviews in important areas that helped in addressing the research objectives. To get maximum benefit from using interview as a qualitative data-gathering instrument, the researcher considered a number of key factors. The section below is devoted to factors that determine successful interviewing.

4.8.2.1 Determinants of successful interviewing

Maree (2012:88) outlined a number of factors that determine successful conduction of interviews as follows:

- Find the person (s) who is (are) best qualified in terms of research question to provide the information required.
- Make it clear to the person being interviewed what the aim of the interview is and what information is required.
- Conduct interim data analysis to ensure that rich data on the phenomenon is achieved.
- Avoid questions that force participants to answer “yes” or “no”.
- Be a good listener and do not dominate the interview.
- Observe the respondent’s non-verbal communication and check non-verbal cues by maintaining eye contact and keeping an upright posture.

Informed by Maree (2012:88), I selected school principals and school counsellors for interviewing. These were considered information-rich pertaining to the well-being of in-school OVC. I also explained the purpose of the interview to the participants before the commencement of the interview. In addition, I explained how the information gathered was going to be handled, why information was collected and how it was going to be used (Chilisa 2005 149; Gray, 2014:391). Since I used semi-structured interviews, the problem of asking participants questions that could be answered ‘yes’ or ‘no’ was circumvented. The researcher listened attentively to participants’ responses and probed them for clarity.

4.8.2.2 Recording interview data

Maree (2012:89) states that recording of an interview must be done in a meticulous manner. In this study, interviews were recorded using a digital audio-recorder as well as field notes. Permission to record the interviews was sought from participants before the commencement of the interviews to get the consent of participants and minimise interviewee reactivity (Haralambos et al., 2008:819; Maree, 2012:89; Runhare, 2012:145). After every interview, I replayed the recorded script and reflected on the interview to identify gaps that needed to be explored in a follow-up interview. In addition, the use of a digital audio-recorder gave me an opportunity to record my perceptions and non-verbal expressions in my field notes while the interview was in progress (Hesse-Biber & Leavy, 2006:198; Maree 2012:89). Furthermore, Babbie (2007:310) suggests that a researcher conducting an interview should always sit down

immediately after an interview and jot down his or her impressions. However, in this study, the researcher jotted down field notes as the interviews progressed. In addition, Babbie (2007:310) stress that field notes help the researcher to remember and explore the process of the interview. Field and Morse (1995:79-82) support the value of field notes in an interview and suggested steps that a researcher should follow to produce information-rich field notes as listed below:

- Getting right to the task, that is not talking about observation before it is recorded.
- Finding a quiet place to write.
- Setting aside adequate time to complete notes.
- Sequencing events in order of occurrence.
- Letting the events and conversation flow from the mind onto the paper.

In the same vein, De Vos, et al. (2011:349) stress that during the interviews, researchers must make full and accurate notes of what goes on. They further advise that researchers should not trust their memories more than they have to. The methods employed in recording interview data ensured the accuracy of data captured since the digital recorder was replayed after every interview and the electronically-recorded data were compared with the field notes. The researcher added more information to the field notes after replaying the digital audio-recorder and noted that some important information was left out. The process helped the researcher to produce a thick description of the situation of in-school OVC.

Furthermore, Fraenkel and Wallen (2003:462) state that field notes serve two purposes namely to:

- Help the researcher to formulate new questions as the interview moves along
- Facilitate later analysis including locating important quotations from the tape itself.

In addition, they advise that failure to take field notes often indicates to the participant that nothing of value is being said, and this may negatively affect the interviewer-interviewee rapport. In view of Fraenkel and Wallen's (2003) suggestions, I made detailed field notes which I analysed together with audio-recorded data after every interview session to identify areas that needed revisiting.

4.8.2.3 Advantages of an interview as a qualitative data-gathering technique

There are many reasons why the researcher used semi-structured interviews for collecting data. One of the strengths of a semi-structured interview is that concepts and words used by the

interviewer and interviewee alike can be clarified (Haralambos, et al., 2008:828; Shastri, 2008:116). In this study, I was able to explain and rephrase questions when respondents were unclear about some questions pertaining to the challenges encountered by in-school OVC. Furthermore, the researcher could prompt and probe the participants to elaborate on issues of interest to the researcher. De Vos *et al.* (2011:350) and Gray (2014:385) highlight that semi-structured interviews are a useful way of gathering large amount of data. Through use of semi-structured interviews, I was able to collect data in the three selected schools in one month. In the same vein, Haralambos *et al.* (2008:828) state that interviews allow close collaboration between interviewer and interviewee so that they can become partners in the research. In this study, the researcher played the role of taking down notes and guiding the interview. This helped to minimise digressions and avoid unnecessary detail. Haralambos *et al.* (2008:828) further stress that interviews allow the opportunity for critical reflection by all those involved so that they can examine and sometimes change the perspectives on how they see the social world. My interaction with school principals and school counsellors stimulated a paradigm shift in the way they have been handling and dealing with OVC. I also found semi-structured interviews practical and flexible allowing me to pose follow-up and probing questions for elaboration. Gray (2011:217) commented that use of probing questions allows the interviewer to explore new paths which were not initially considered. Through this technique, the researcher explored the well-being of in-school OVC in detail.

4.8.2.4 Disadvantages of semi-structured interviews

Notwithstanding an array of advantages of semi-structured interviews, the data-gathering technique has some weaknesses which the researcher took note of. One of the major weaknesses of the interview technique is interviewer bias (Haralambos, et al., 2008:828; Maree 2012; Punch, 2011:175). Interviewer bias refers to a situation where the interviewer (usually without realising it) directs the interviewee towards giving certain types of responses (Chiromo, 2006:18; Haralambos, et al., 2008:828). One of the negative consequences of interviewer bias is that respondents might give the sort of answers that they believe the interviewer wants to hear rather than saying what they truly believe (Haralambos, et al., 2008:838). Similarly, De Vos *et al.* (2011:349) maintain that participants are likely to provide the researcher with the ‘official account’ which is not really valid. To minimise interviewer bias, I explained the purpose of the study to the participants prior to the interview process, and also ensured that my role as an interviewer was non-directive so as to get valid information from the participants. More so Cohen, et al. (2011:245) stated that the rationale of explaining the purpose, aim,

objectives and role of participants is to establish a relationship between the researcher and respondents as well as removing suspicion during the research process.

4.8.3 Document Analysis

De Vos et al., (2011:374) state that document analysis involves the study of existing documents, either to understand their content or illustrate deeper meanings revealed by their style and coverage. Documents are an important source of data in research. In document analysis, documents such as records, diaries, academic work books, periodicals, bulletins, syllabi and cartoons may be analysed (Best & Kahn, 2003:72). In this study, I combined document analysis with semi-structured interviews and FGDs to validate and cross-check data. Informed by Punch (2011:184) and De Vos et al., (2011:374), I triangulated the aforementioned data-gathering techniques so that the strengths of one procedure could compensate for the weaknesses of another and improve the quality of data collected. Documents that I looked at included class registers, OVC enrolment statistics at each of the three sampled schools, BEAM beneficiary register, guidance and counselling scheme books, school counsellors' referral books, mission statements, school diary of activities and minute books. Analysis of these documents helped me to tease out the nature of service provision accorded to the in-school OVC, and the problems encountered by schools in responding to the needs of these children (Haralambos, et al., 2008:841; Punch, 2011:184). There are different categories of documents that a researcher can use as sources of data; these are explored in the section below.

4.8.3.1 Types of documents

Creswell (2003:188) and Jupp (2006:79) distinguished between private and public documents. Similarly, Ritchie and Lewis (2003:35) distinguished between public documents; for example, government publications, procedural documents, such as minutes of meetings and personal or private documents such as letters or diaries. I analysed public or official documents in the three sampled schools as I considered them to be relevant in offering insights into the well-being of in-school OVC (Chilisa & Preece, 2005:159; Punch, 2011:184).

According to De Vos et al. (2011:375), official documents or non-personal documents mean those documents compiled and maintained on a continuous basis by large organisations such as government institutions. They added that official documents are more formal and structured than personal documents. Official documents include minutes and agendas of meetings, inter-office memos and annual reports (Ritchie & Lewis 2003:35). Chilisa and Preece (2005:159)

and Haralambos et al.(2008:841) indicate that public documents enable the researcher to access the language and words of the informants. I analysed diaries of activities for the three selected schools, minutes of parents-teacher meetings, guidance and counselling schemes of work with a view to gauge the degree to which OVC issues are infused in the school programmes. Document analysis was used in this study, because of the advantage that it is a non-interactive or unobtrusive data source (Gray, 2014:428, Haralambos et al., 2008:840). The problem of interviewer bias or reactivity associated with obtrusive data-gathering techniques like interviews and observation was circumvented by adopting unobtrusive document analysis. Another advantage the researcher exploited from using document analysis was that the technique saved time and minimised the expense of writing notes since I worked with pre-existing data (Chilisa & Preece, 2005:159).

In using document analysis, the researcher took cognisance of the limitations of the data-gathering technique. Marlow (2005:182) posits that most documents are not written with a view to being used for research. In addition, De Vos et al. (2011:375) contend that non-personal documents such as minutes of meetings, agendas, newsletters and internal office memos are written with a view to the continued functioning of an organisation. Similarly, Punch (2011:185) stresses that in document research, nothing can be taken for granted, and recommended that everything should be checked from more than one angle. Informed by Punch (2011:185) and De Vos et al.(2011:375), the researcher did not take the information from the official documents from the three schools at face value but subjected the data to critical analysis, taking into consideration the context in which the documents were produced and their purpose. For example, I found that some schools inflated OVC enrolment statistics with a view to getting more assistance from government and NGOs. Furthermore, Maree (2012:83) warned that researchers should take care to evaluate the authenticity and accuracy of records before using them. Thus, I dealt with documents that had an official stamp on them to ensure that I was dealing with authentic documents.

4.8.3.2 Criteria for selecting documents as sources of data

Maree (2012:83) proposes a number of factors that researchers should consider when choosing documents as sources of information in order to obtain valid data. The researcher should always verify the following:

- What kind of document are you dealing with (primary or secondary source)?
- Is it based on empirical data or an opinion?

- What was the purpose of the document?
- What are the main points or arguments put forward, and how they relate to the topic under study?
- What was the research methodology used in producing the document?

The points raised by Maree (2012:83) relating to use of existing documents as sources of data in research are critical for researchers to consider as most documents are produced for different purposes which may not be related to the area of study of the researcher. Taking existing documents at face value leads to conclusions which are not valid. Thus, it is important to put the documents into context, identify the purpose for which the documents were produced and relate that to the study topic at hand. In this study, the researcher critically analysed school documents such as minutes of staff meetings, BEAM records and school diaries of activities to find out whether schools incorporate issues concerning OVC in their programmes.

4.9 TRUSTWORTHINESS OF QUALITATIVE DATA

In qualitative research, researchers are concerned with trustworthiness of data while in quantitative research emphasis is on reliability and validity (Schwendt et al., 2007:403). The section below focuses on trustworthiness strategies aimed at enhancing the quality of data.

4.9.1 Criteria for Trustworthiness of Qualitative Data

Qualitative researchers identified four criteria for trustworthiness namely credibility, transferability, dependability and confirmability (Anney, 2014: 272; Tobin & Begley, 2004: 392). According to Schwendt et al. (2007) the measures of trustworthiness of data ensure the rigour of qualitative findings. Since this study is grounded in the qualitative approach, the researcher observed the criteria for trustworthiness as discussed in the sections below.

4.9.2 Credibility and Trustworthiness of Data

Credibility refers to the confidence that can be placed in the truth of the research findings (Holloway & Wheeler, 2002:85; Macnee & McCabe, 2008:54). Granchem and Lundman (2004:54) add that credibility establishes whether or not the research findings represent correct information drawn from the participant's original data and a correct interpretation of the participants' views. In short, credibility refers to how the research measures what it is supposed to measure. There are a number of credibility strategies a qualitative researcher can adopt to ensure rigour of the inquiry such as prolonged engagement, triangulation, peer debriefing,

selection of context and participants, and approaches to gathering data (Anney, 2014:273; Cohen et al.,2011). In this study, credibility of qualitative data was ensured through triangulation, peer debriefing and selection of context, participants and data-gathering instruments. The researcher triangulated informants where school principals, school counsellors and in-school OVC participated in the study. Data collection instruments were also triangulated where interviews, FGDs and document analysis were applied. Triangulation of informants and data collection instruments was done in order to corroborate evidence and reduce bias as the process cross-examines the integrity of participants' responses (Onwuegbuzie & Leech, 2007:239). Peer examination was also done to boost the credibility of qualitative data collected. In this study, the researcher discussed his research methodology and findings with colleagues in the Department of Educational Foundations at Great Zimbabwe University who teach research methods and statistics. Being knowledgeable in qualitative research, they were able to provide guidance. Peer examination is critical in research in that it helps the researcher to be honest about his or her study as the work is scrutinised by colleagues which helps to identify categories not covered by the research question (Bitsch, 2005:80).

4.9.3 Transferability and trustworthiness of data

Transferability is one of the measures of trustworthiness of the qualitative research process. It refers to the extent to which the results of a qualitative research can be transferred to other contexts with other respondents (Anney 2014:278; Bitsch, 2005:83). Bitsch (2005:85) further posits that transferability of research findings can be enhanced through generation of thick description by the researcher and purposively selecting research participants. A thick description enables judgement about how the research context fits other contexts (Li, 2004: 305). This implies that a qualitative researcher should give details of the research methodology and context. In this study, the researcher produced thick descriptions of the research process through audio-recording interviews and FGDs as well as recording details of the study in a reflexive journal.

Purposive sampling is another strategy for facilitating the transferability of qualitative data. Teddlie and Yu (2007:77) define purposive sampling as a selection of units such as individuals, groups of individuals or institutions based on specific purposes associated with answering a research question. In this study, all the participants; school principals, school counsellors and in-school OVC were purposively selected as they were deemed knowledgeable about the well-being of in-school OVC. This was done in cognisance of Schutt's (2006:67) observation that

purposive sampling helps the researcher to focus on the key informants who are knowledgeable about the issues under investigation.

4.9.4 Dependability and Trustworthiness of Data

Dependability is another criterion of trustworthiness of qualitative data (Ary et al., 2010:115; Cohen et al., 2011:423). Dependability refers to the extent to which research findings can be replicated in the same context with same participants (Bitsch, 2005: 86).

Ary et al. (2010:116) and Cohen et al.(2011:430) concur that dependability is established through a number of strategies which include audit trails, coding, recoding and triangulation. The ensuing section outlines how these strategies were implemented in this study.

Triangulation of sources of data information and research instruments was done to ensure dependability in the same way as it was done to achieve credibility (see section 4.9.2). An audit trail involves an examination of the research process and products of the research in order to validate data (Bowen, 2009:64; Li, 2004:27). In this regard, Guba and Lincoln (1982) suggest that raw data such as interview observation notes, documents and records collected from the field should be kept for cross-checking the inquiry process. In this study, the researcher kept all data collection instruments and the data collected from the participants. Code and recoding of data was also done by the researcher to enhance the dependability of the findings of the study. The recoding strategy involves coding the same data twice after a short interval (Chilisa & Preece, 2005:18). The strategy is also called coding agreement (Anney, 2014: 279). If the recoding process results are in agreement with the initial coding, the dependability of qualitative research is enhanced (Chilisa& Preece, 2005:21). In this study, coding and recoding was done and the process generated the same themes suggesting a high level of dependability of the research study. Other strategies that facilitate dependability of qualitative data such as peer examination and triangulation were carried out in the same manner as in section 4.9.3.

4.9.5 Confirmability and trustworthiness of data

Confirmability refers to the degree to which the results of an inquiry could be confirmed by other researchers (Anney et al., 2016: 278). Tobin and Begley (2004:392) add that confirmability is concerned with establishing that data and interpretations of findings are not affected by personal interests and biases. Thus confirmability is concerned with production of neutral data. Confirmability of data is achieved through the following strategies: an audit trail, reflexive journal and triangulation (Anney et al., 2016:279). To Bowen (2009: 307), an audit

trail is critical in achieving confirmability since it offers visible evidence from the research process that the researcher did not simply generate what he or she set out to find. The above strategies aimed at achieving confirmability were implemented in this section in the same manner they were implemented to enhance transferability (see section 4.9.3).

4.10 DATA ANALYSIS PROCESS

Gray (2009:493) defines data analysis as a rigorous and logical process through which the mass of collected data in a study is given order, structure and meaning. According to Creswell (2013:179), data analysis involves organising the data; conducting a preliminary read-through of the database; coding and organising themes; representing the data; and forming an interpretation of them. Similarly, Fraenkel and Wallen (2003:453) view data analysis as a process involving analysing and synthesising information the researcher obtains from various sources into a coherent description. In this study, data collected through FGDs, semi-structured interviews, and document analysis were analysed qualitatively.

4.10.1 Qualitative Data Analysis

Qualitative data analysis is an on-going and iterative (non-linear) process (Coffey & Atkinson, 1996:2; Creswell, 2007:150; Maree 2013:99). This means that data collection, processing, analysis and reporting are intertwined. In this sense, data analysis and interpretation were linked up to the process of data-gathering in that after every data-gathering visit, I engaged with the data by transcribing audio-recorded data verbatim and studying field notes. Non-interactive data from document analysis and interactive data from FGDs and interviews were scrutinised in order to identify themes on how participants viewed the role of schools in addressing the needs of OVC. De Vos et al. (2005:338) and Hesse-Biber and Leavy (2006:355) are in agreement that data analysis process bring order, structure and meaning to the mass of collected data. The researcher used the model of data analysis suggested by Tesch (2013:95). The method entails scrutinising the data collected for the emergence of themes. The researcher read through the field notes made during interviews with school principals and school counsellors and FGDs with learners, categorised and coded the data-producing segments related to the participants' views on the responsiveness of schools to the needs of OVC. Coding of data was done following the research questions and objectives.

Maree (2012:100) states that data analysis in qualitative research is cyclical, while Creswell (2013:183) propose a spiral interrelationship of the processes involved. However, both models, cyclical and spiral affirm that data analysis is iterative (Creswell, 2013:182). This means that the process of data collection, data analysis and report-writing are not distinct steps in the research process, but are interrelated and often occur simultaneously.

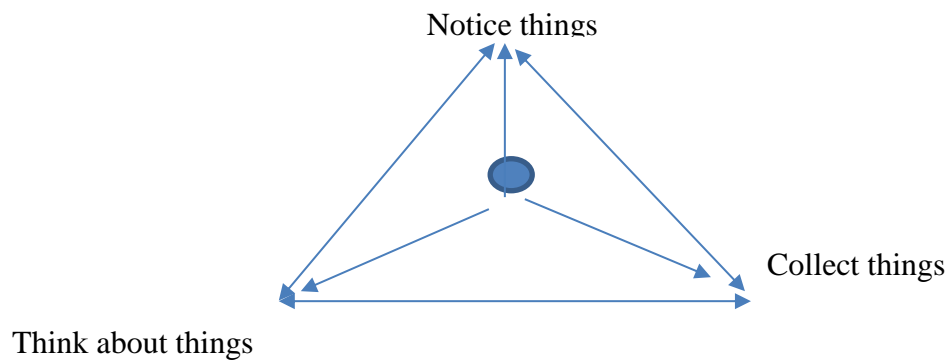


Figure 4.3: Iterative data analysis process model

Source (Maree, 2012:100)

Maree's (2012) model consists of three essential elements, namely, noticing, collecting and reflecting or thinking about things. The elements are interlinked and cyclical. In this study, the researcher did not treat the three elements as stand-alone entities; that is, I did not simply notice, collect and then think about things, and then write a report. Rather, the process adopted was iterative and progressive in that the three processes took place simultaneously. For instance, when I was reflecting on the data collected, I noticed some gaps in the data which prompted me to go back to the field to collect data that addressed the identified gaps. Thus, Chiome (2012:128) commended that the process is an infinite spiral as the researcher can move forward and backwards the different stages of data analysis.

Procedures		Examples
Representing visualizing	→	← Account
Describing, Classifying, Interpreting	→	← Matrix, trees, propositions
Reading memoing	→	← Context, categories, comparisons

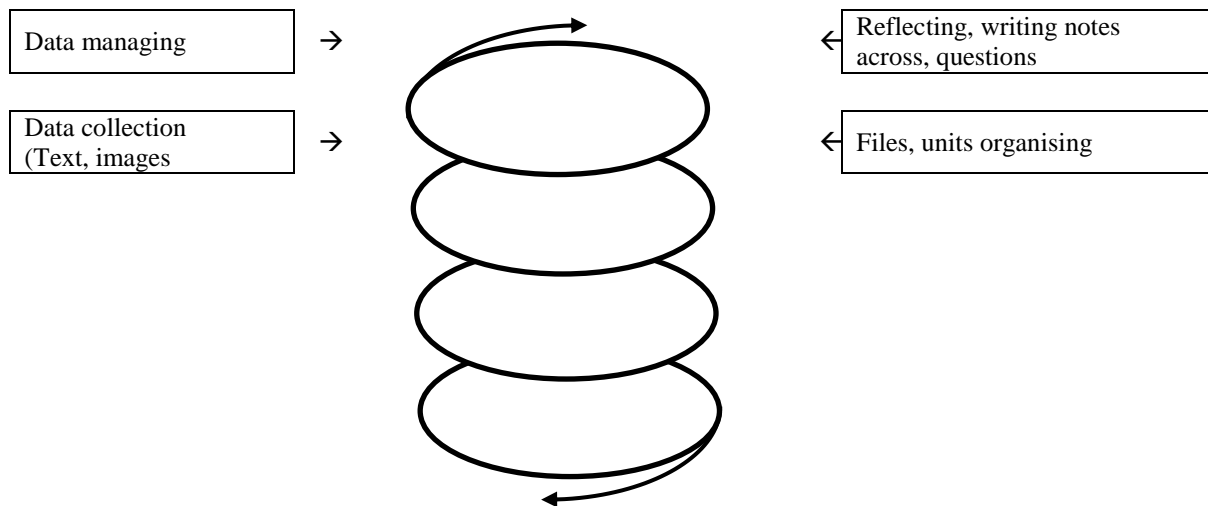


Figure 4.4: Data analysis: spiral model

Source: Creswell (2013:183)

Related to Maree's (2012) iterative model is the data analysis spiral model by Creswell (2013:183). The spiral model has a number of stages of organising data for qualitative analysis which include data management, reading and memoing, describing, classifying, interpreting and representing and visualizing (Creswell, 2013:183). The iterative and spiral models of qualitative data analysis are general models that apply to all qualitative data analysis, and thus an overview of these models was given to appreciate their value in research.

4.10.1.1 Tesch's method of qualitative data analysis

Tesch's method of data analysis has eight steps involved in analysing data (Creswell; 2009:186). The researcher adopted these stages in analysing data in the current study as follows:

- The researcher read through the transcriptions of the interview, FGDs and observational notes carefully picking main ideas as they came to mind;
- All the interview documents were analysed identifying main ideas with focus placed in understanding substance of the information
- Analysis of collected data generated themes around which the researcher clustered data collected. The topics were then formed into columns, which were arranged as major topics, unique topics and leftovers;

- The researcher compared topics generated during analysis of data with the original interview data documentary data and observational data and abbreviated the topics and wrote the codes next to the appropriate segments of the text.
- Final categories were formed from the most descriptive wording for the topics and topics related to each other were grouped together in order to reduce the total list of categories
- The final decision on the abbreviation for each category and the alphabetised codes was made;
- The researcher collected the data belonging to each category in one place and performed preliminary analysis; and
- Existing data was recorded when necessary.

Data analysis was undertaken as an on-going and iterative process. This means that the process of data collection, processing, analysis and reporting did not happen as distinct successive steps rather they were performed concurrently as overlapping cycles (Creswell, 2007:150; Johnson & Christensen, 2008:389; Phorabatho, 2013:147). In analysing data, the goal of the researcher was to identify and summarise common words, phrases, themes and patterns that would aid understanding and interpretation of themes that emerged (Maree, 2012:99).

As proposed by Ary et al. (2006:454), I did not wait until all data was ‘in’ before beginning to analyse it. Similarly, Hesse-Biber and Leavy (2006:335) posit that analysis and interpretation are not two distinct phases in the process of qualitative research process. The researcher often engages simultaneously in the process of data collection, data analysis and interpretation of the research findings. In this study, data analysis started from with the first focus group discussion and continued as the process of data collection progressed.

4.11 ETHICAL CONSIDERATIONS

Maree (2012:306) states that “Anyone involved in research needs to be aware of the general agreements about what is proper and improper in scientific research”. He adds that throughout the research process, the researcher should follow and abide by ethical guidelines. In the same vein, McMillan and Schumacher (2010:122) posit that the manner and code of ethics of researchers should be above reproach. Consequently, this research was conducted in line with ethical academic standards which included seeking permission to conduct the study from the Permanent Secretary for the Ministry of Primary and Secondary Education (Zimbabwe) (Appendices 2&3). The researcher also applied for the ethical clearance certificate from the

UNISA College of Education which was granted (Appendix 4). In addition, the researcher paid attention to other ethical issues such as informed consent, confidentiality, anonymity, protection from harm and deception.

4.11.1 Informed Consent and Voluntary Participation

Informed consent refers to an agreement to participate in a study after being informed of the study's purpose, procedures, risks, benefits, alternative procedures and limits of confidentiality (David & Sutton, 2004:18; Johnson & Christensen, 2008:109). Chiromo (2006:10) lists the basic elements of information the researcher should avail to participants to ensure informed consent as follows:

- The purpose of the study;
- Explanation of procedures to be followed in the research process;
- Explanation of how and why participants were selected; and
- Assurance that participants are free to decline or withdraw their consent and discontinue participating in the study any time without giving reasons.

Informed consent of participants was sought prior to the commencement of data collection (Maree, 2012:306; Creswell, 2013:174). Participants were informed of the purpose of the research in advance, and they signed consent forms after the researcher's explanation. The participants were also told that their participation was voluntary, and that they were free to withdraw at any given time without fear of any consequences. The learners signed the assent form and their parents or guardians signed the informed consent form on their behalf.

4.11.2 Confidentiality

Cohen et al. (2011:65) define confidentiality as not disclosing information from participants or identifying respondents using information they have provided. According to McMillan and Schumacher (2010:122) and Schulze (2002:18), confidentiality means that no one should have access to individual data or the names of the participants except the researcher, and participants should know before they participate as to who would see the data. Confidentiality was enhanced by assuring participants that their information would be treated in the strictest of confidence (Chiromo, 2006:11; Maree 2012: 307). Confidentiality was also observed through assigning code names or pseudonyms so that data collected could not be linked to individual respondents by name (Schulze, 2002:18).

4 11.3 Anonymity of Participants

Anonymity is one of the ethical issues the researcher observed in this research. Rubin and Babbie (2008:435) maintain that a respondent has anonymity when the researcher cannot identify a given response with a given respondent. Anonymity presents a challenge in interviews because the researcher collects information from identified respondents. However, I addressed this problem by using code names in place of participants' and schools 'real names' (Cohen, *et al.*, 2011:64; O'Leary 2010: 42). Thus, participants were asked to state their codes (numbers that were allocated to them) and not their real names during the interviews.

4.11.4 Protection from Harm

Protection from harm is one of the major tasks of the researcher (David & Sutton, 2004:19; Maree, 2012:306). In addition, Chiromo (2006:11) suggests that participants must be protected from physical, social, emotional and spiritual harm or from potential harm of any nature. The participants were not harmed in any way since the researcher was honest, respectful and sympathetic towards all participants. All participants were treated with the fact in mind that they could get tired and make mistakes; hence there were some interview and focus group discussion breaks to allow participants to relax and resume interviews with enthusiasm.

4.11.5 Deception or Covert Activities

Chiromo (2006:11) views deception as not telling participants the truth about the research. Rubin and Babbie (2008:435) consider deceiving participants within social research as unethical. However, there is a school of thought which postulates that deceiving participants is only acceptable when:

- No harm comes to the participants.
- The truth so discovered is worth the lies in the process.
- It is the only way to discover something of real importance (Chiromo, 2006:11; Creswell 2013:174).

In this study, deception was circumvented by explaining the purpose of the study to the participants prior to the commencement of data collection as highlighted under informed consent section 4.12.1.

4.12 CHAPTER SUMMARY

This chapter covered research paradigms, research design, target population, sample and sampling techniques. A phenomenological research design was chosen as the most appropriate design for this study to address the research problem. The rationale for the choice of qualitative data collection methods such as focus group discussion, semi-structured interviews, observation and document analysis was provided. Data collection procedures, data analysis, validity, reliability, credibility, trustworthiness issues as well as ethical considerations were also covered in this chapter. In the next chapter, the results of the study collected from different sources will be presented, analysed and interpreted.

CHAPTER 5

DATA PRESENTATION, ANALYSIS AND DISCUSSION

5.1 INTRODUCTION

The aim of this study was to establish the responsiveness of rural primary schools in Zimbabwe to the needs of in-school OVC. Chapter 4 covered research methodology which focused on research design, research paradigms, population, sample and sampling techniques. Data collection instruments, data presentation, analysis as well as ethical considerations were also covered in Chapter 4. In this chapter, data collected through in-depth interviews, FGDs and document analysis are presented, analysed and discussed in line with the research questions undergirding the study.

5.2 DEMOGRAPHIC DATA OF PARTICIPANTS

This section covers demographic data of participants such as gender, experience in the post and age. Demographic data of participants was covered because it has a bearing on the participants' views on the subject under study.

Table 5.1: Statistics of OVC in Grade 7 in the sampled schools by gender

School	Gender	Frequency	Frequency %
A	Male	9	12.9
	Female	9	12.9
B	Male	13	18.6
	Female	17	24.3
C	Male	12	17.1
	Female	10	14.3
Total		70	100

Table 5.2: Composition of the sample by gender

Participants	Gender	Frequency	Frequency %
Principals	Male	1	4.2
	Female	2	8.33
School counsellors	Male	3	12.5
	Female	3	12.5
Learners (OVC)	Male	8	33.33
	Female	7	29.2
Total		24	100

Table 5.2 above shows the composition of the sample of participants by gender. It indicates that there were three principals comprising one male and two females. The sample was slightly biased against males, and this could mean that gender equality campaigns done in the country

are yielding results, and that more women are now taking up leadership positions like being school principals. In fact, the permanent secretary for the Zimbabwe Ministry of Primary and Secondary Education report of 1993 encouraged female teachers to apply for promotion to principals and deputy principal posts. This could be one of the reasons why there were more female than male principals in this sample. There were six school-counsellors in this sample comprising three males and three females. A deliberate attempt was made by their searcher to balance the gender of school-counsellors so that challenges confronting the boy and girl OVC could be explored in a balanced manner since I assumed that male school counsellors interact more with male OVC while female counsellors interact more with female OVC. Table 5.2 indicates that 15 OVC participated in the study; these comprised eight males and seven females. There were almost an equal number of male and female learners in the sample purposively selected in order to capture the views and sentiments of both male and female in-school OVC on the challenges they confronted.

Table 5.3: Experience of principals in the post

Experience in years	Frequency	Frequency %
Below 5	1	33.3
6-10	0	0
11-15	2	66.7
16-20	0	0
Above 20	0	0
Total	3	100

Table 5.3 shows that there was one school principal with less than 5 years' experience in the post and two with the experience of between 11 and 15 years in the post. From the data in Table 5.3 it can be concluded that the school principals sampled were adequately experienced, such that they could provide relevant information on challenges confronting in-school OVC and the efforts being made by schools to ameliorate these challenges.

Table 5.4: Distribution of principals in the sample by age

Age in years	Frequency	Frequency %
<30	0	0
31 – 35	0	0
36 – 40	1	33.3
41 –45	2	66.7
>45	0	0
Total	3	100

Table 5.4 shows that one out of three of the sampled principals' age range was between 36 and 40 years of age while two out three of the principals were between 41 and 45 years of age. Judging by the ages of the principals as shown in Table 5.4, it can be deduced that the principals sampled were mature enough to handle problems confronting different types of learners like OVC, and that they could provide the researcher with relevant data relating to the welfare of in-school OVC.

Table 5.5 Distribution of school counsellors by age, qualification and job experience

Variable	Variable description	Number	Frequency %
Age in years	< 30	0	0
	31 – 35	0	0
	36 – 40	4	66.7
	41 – 45	1	16.7
	> 45	1	16.7
Professional qualifications	Diploma in education	3	50
	B.E.D (Primary)	3	50
	B.E.D (Secondary)	0	0
	B.S.C Counselling	0	0
	M.Ed.	0	0
Job experience in years	< 5	2	33.3
	6 – 10	1	16.7
	11 – 15	1	16.7
	16 – 20	1	16.7
	> 20	1	16.7

Table 5.5 shows demographic data of school counsellors. The data show that four out of six school counsellors were between 36 and 40 years of age, while there was one in each of the following age ranges 41-45, and above 45 respectively. In terms of age, all six counsellors were mature enough to guide and counsel learners adequately.

Furthermore, Table 5.5 shows that three of the six school counsellors were holders of Diploma in Education, while the other three held Bachelor of Education degree (Primary). In Zimbabwe, a Diploma in Education is the basic qualification of a teacher offered by teacher-training colleges while the Bachelor of Education degree is offered by universities. It can be assumed that the counsellors were qualified to assist OVC confronting multiple challenges reasonably well. However, it is worrying to note that none of these school counsellors was a specialist in counselling, and this could have compromised the quality of counselling services they provided. Lack of specialist school counsellors may militate against provision of quality care and support to OVC in schools. In this regard, research conducted in South Africa (Mwoma & Pillay, 2016; Naidoo, 2010; Wood & Goba, 2011) revealed that teachers' support for OVC is hampered by lack of training of teachers in issues affecting OVC. Related studies carried out

in Zimbabwe indicated that implementation of HIV and AIDS school curricula was hampered by lack of appropriate training of teachers in the subject area (Mugweni, 2012; Mupa, 2012). This could be the same challenge confronting rural primary schools in Zimbabwe to care for and support in-school OVC effectively.

In terms of job experience, the data in Table 5.5 shows that four of the six school counsellors had more than five years' teaching experience while only two had less than 5 years' teaching experience. This shows that, overall, the school counsellors were experienced enough to assist in-school OVC. Their long experience in the job may mean that they had handled a number of issues affecting OVC before and might have attended some workshops on OVC care and support that capacitated them to handle OVC's challenges adequately.

5.3 THE RESPONSIVENESS OF SCHOOLS TO THE NEEDS OF THE OVC

The aim of this study was to explore the responsiveness of rural primary schools in Zimbabwe to the needs of OVC. Specifically, the main research question this study sought to answer was framed as follows: To what extent are rural primary schools in Zimbabwe responsive to the needs of OVC? To address this main question, the following sub-questions were posed:

1. Are rural primary schools in Zimbabwe equipped to address the material needs of in-school OVC?
2. How prepared are the rural primary schools in Zimbabwe to deal with the psychosocial problems confronted by in-school OVC?
3. To what extent are teachers competent in dealing with OVC?
4. Are there structures in rural primary schools meant to address the needs of OVC?
5. How can rural primary schools be empowered to meet the needs of OVC?

This section analyses and discusses data collected from the respondents through in-depth interviews, FGDs and document analysis guided by the research sub-questions.

5.3.1 Are Rural Primary Schools Equipped to Address the Material Needs of In-School OVC?

In-depth interviews held with school principals, school counsellors and FGDs conducted with OVC, as well as document analysis revealed that OVC confront multiple material challenges. The challenges highlighted were clustered in the following themes: food and nutrition,

provision of stationery, provision of school uniforms and payment of school fees. Each of the aforementioned themes is discussed in the next section.

5.3.1.1 Provision of food and nutrition

In-depth interviews with principals and school counsellors revealed that one of the major challenges OVC encounter is lack of adequate food. FGDs held with learners at the three sampled schools also highlighted that OVC struggle to get food, which consequently compromises their concentration levels in class and academic performance. The verbal quotes from in-depth interviews and FGDs cited below demonstrate the magnitude of the food problem among in-school OVC. The participants expressed their views on the critical shortage of food the country was grappling with as follows:

Generally, most households this year have no adequate food due to El-Nino-induced drought that has affected the whole of the Southern Region. The hardest hit groups are child-headed families and those headed by grandparents. Children from such families' attendance are erratic(SP-A).

SCF-C expressed the problem this way:

OVC come to school with no lunch boxes, an indication that they do not have food at home to bring to school, as a result they steal other learners' food. Most of the theft cases I have handled involved OVC. It is really a cause for concern.

Another learner participant (FGD-B) stated her predicament thus in Shona:

Dambudziko rangu guru nderokushaya chikafu. Kazhinji ndinouya kuchikoro ndisina kudya nokuti pamba panenge pasina chikafu. Ndinozowana chokudya ndabva kuchikoro.

My biggest challenge is hunger. I normally come to school hungry because my grandparents cannot afford breakfast. I will get something to eat after school.

The responses from different participants on food and nutrition situation of in-school OVC captured in the extracts above indicate that food is one of the major problems confronted by OVC and that it drives them into delinquent behaviour.

In view of the challenges of food deficiency confronted by the OVC, the participants were asked to highlight the efforts being made by schools to ameliorate the problem. All the

participants, three principals, six school counsellors and 15 OVC concurred that schools have no capacity to feed in-school OVC, unless they were supported by the government or the donor community. The following verbal quotes by two school principals affirm this finding:

Eeee, in terms of provision of food to the needy, the school has no capacity to feed them. In fact, we feel for these children, but the major problem is finance; our fees are very low, and this is compounded by late and non-payment of fees by some learners; we cannot afford to feed these children(SP-B).

We used to have a viable school-feeding scheme some eight years ago sponsored by Care International. This scheme was good for our learners but the scheme has since been stopped(SP-C).

The excerpts above indicate that the principals concurred that rural primary schools had no capacity to feed in-school OVC due to various factors which include low school fees charged by primary schools. It became evident from their responses that viable school-feeding schemes were possible with the intervention of NGOs.

The stoppage of the school-feeding scheme sponsored by Care International, a non-governmental organisation highlighted by SP-C was confirmed by the researcher through document analysis of inventory registers that were used when the programme was operational. Document analysis indicated that the feeding scheme commenced in 2009 and ceased in 2013. When I probed the reasons for the termination of the school-feeding scheme, the school principals and counsellors could not shed light on this subject except to indicate that reasons were political in nature.

However, as I was collecting data at school, eight 50kg bags of maize meal were delivered at the school. Upon asking the principal, he revealed that the government, through the Department of Social Welfare, allocates maize meal to rural primary schools to resuscitate the school-feeding programme. It emerged that this feeding scheme caters for learners from pre-school to Grade 2. When I visited schools B and C, I found that the schools had also received their allocation. Commenting on this initiative SP-B said:

The donation is insignificant; the government should have covered all vulnerable children in the school rather than limiting it to infant classes. Even though, giving schools bags of maize meal without other materials like cooking oil, relish (murivo) that makes the feeding scheme a reality is not fair.

These sentiments were also expressed by all school counsellors and learners during the in-depth interviews and focus group discussion. The following excerpts attest to the need for a vibrant school-feeding scheme.

A school-feeding programme of the magnitude of the one which was operational between 2009 and 2013 is the panacea to the food challenges experienced by in-school OVC(SCM-A).

Dambudziko guru ratinosangana naro inzara. Vazhinji vedu tinouya kuchikoro pasina chatadya zvinova zvinokanganisa kudzidza kwedu. Chikafu pano pachikoro chinopiwa vana vadiki isu vemagwaro makuru hatisi kupiwa kungangwe zvazvo kune vana vanoshaya(FGD-A).

Our biggest challenge in the school is lack of food. Most of us come to school on an empty stomach which affects our learning negatively. There is no feeding scheme for the upper grades yet there are also vulnerable children in these grades(FGD-A).

On the utility of the school-feeding scheme sponsored by the government, all the participants in this study concurred that it was inadequate as it only caters for OVC at Early Childhood Development and infant level. A more comprehensive school feeding scheme was advocated for by the participants.

Most OVC participants expressed their displeasure at being not covered by the current school-feeding scheme. Some could not actively participate in FGDs and I could see that some were weary because of food deficiency.

5.3.1.2 Provision of stationery and quality of education

Lack of stationery on the part of in-school OVC was one of the themes that emerged from all the participants. In-depth interviews with principals and school counsellors revealed that most in-school OVC did not have adequate stationery, which also contributed to high absenteeism. Two of the three principals indicated that they were not providing learners with stationery because of financial constraints. SP-B indicated that only two OVC were sponsored with respect to fees and stationery by a non-governmental organisation called Community-Based AIDS Programme (CBAP). She, however, expressed concern that the majority of in-school OVC desperately needed assistance with stationery. FGDs with OVC also affirmed the views

of principals and counsellors that OVC lacked stationery. The following excerpts from different respondents demonstrate the gravity of lack of stationery among in-school OVC.

As a school, we are unable to provide stationery even to the needy learners because we don't have the financial capacity to do that. We do not charge school fees as we wish; it is a process which involves consulting parents, and finally approved by the PED. My point is that our fees are too low to purchase stationery for our learners (SP-C).

The views of SP-C were supported by the other two principals who indicated that the standard and quality of results in their schools were compromised by learners who were not well supported with the requisite stationery. The sentiments expressed by the principals on the situation of stationery for OVC were shared by two school counsellors as highlighted by the extracts below:

Three quarters of OVC I provided counselling services this term mentioned lack of stationery, such as exercise books and pens as the major reason for not coming to school regularly. These children really need help in this respect (SCM- A).

We used to have a club made up of teachers and learners that was engaged in some fundraising projects like selling sweets. The proceeds would go to the procurement of stationery for the OVC, but the club is no longer functional; I don't know why (SCF-B).

The extracts from school principals and school counsellors captured above show that rural primary schools have no capacity to provide in-school OVC with stationery and that the situation impacts negatively on the quality of education they receive.

Data from FGDs held with OVC in the sampled schools also indicated that schools were not catering for stationery requirements of learners as expressed in the excerpts below:

Zvinoshugurudza kuti unoudza vanokuchengeta kuti tinodao zvombo zvokunyoresa ivo vozvitora kunge mahumbwe. Woudza mudzidzisi dambudziko rako otadza kuzvinzwisisa okudzinga mukirasi (FGD-B).

It is embarrassing that you tell your caregiver that you need stationery and they dismiss the plea as futile. You also tell the teacher of your situation who also does not take you seriously and chase you out of the classroom for not writing (FGD-B).

Dai Chikoro chatipao zvombo zvokushandisa pazvidzidzo zvedu tingabatsirika zvikuru. Iyezvino hatisikunyora basa muzvidzidzo zvakawanda nokuda kwokushaya zvokushandisa(FGD-C).

If schools can provide us with stationery, our situation can improve significantly. Right now, we are not benefiting much from the teaching-learning exercise because we don't write exercises and tests in a number of subjects because we do not have the requisite stationery(FGD-C).

BEAM inotibhadharira mari yechikoro dai yatitengerao nezvekushandisa mukirasi zvakaita semabhuku ne bhiro nokuti kubhadharirwa mari yechikoro iwe usinganyori hazvibatsiri(FGD-A).

BEAM which caters for our school fees should also provide us with stationery without that it's as good as not paying school fees(FGD-A).

Responses from OVC captured in the above excerpts indicate that these learners confront challenges at school due to lack of stationery. The responses also show that OVC look up to their caregivers and the government to provide them with the requisite stationery. As it emerged from the findings of this study that government does not provide stationery to in-school OVC and that most OVC caregivers are incapacitated to provide such basic facilities, the involvement of schools in this regard becomes necessary.

5.3.1.3 Provision of school uniforms and payment of school fees

School uniforms are a requirement for every school learner. Each school has its own uniform for identification. This research found that procurement of school uniforms is a challenge to in-school OVC. In-depth interviews with principals revealed that although a complete school uniform for a learner is a policy requirement, the policy is difficult to implement in rural schools where most learners come from poor backgrounds. All three principals concurred that most in-school OVC did not have school uniform and that schools had no resources to assist them except to allow them to wear casual clothing. The sentiments of school principals were also expressed by the school counsellors and OVC who participated in this study. The following excerpts from different participants confirm this observation:

Schools cannot afford to purchase school uniforms for OVC. Procurement of uniforms is the responsibility of parents or guardians(SP-A).

Although we expect every learner to be in school uniform, we relax the policy when it comes to OVC, we allow them, to wear any colours because of their poor backgrounds(SP-C).

Although OVC are allowed to wear casual clothes at school, not being in school uniform make them susceptible to stigma and discrimination which affects their self-esteem negatively(SCF-B).

OVC are discriminated and stigmatised by fellow learners because some of them, wear tattered clothes at school, I feel for them but the school has no financial resources to assist them in this regard(SCM-A).

Tinoshuvao kuratidzika sevana vechikoro ne unifomu yakazara asi kuti vanotichengeta havakwanise kutitengera (FGD-C).

We envy our classmates who are in complete school uniform. We also want to be in school uniform but our guardians cannot afford(FGD-C).

The extracts above from all the participants indicate that school uniforms are a basic necessity for all learners including OVC as uniforms minimise discrimination and stigmatisation of in-school OVC. The participants indicated that rural primary schools had no capacity to provide in-school OVC with uniforms due to lack finance. This scenario suggests the need for partnerships between the school and other stakeholders as alluded to in Bronfenbrenner's ecological theory.

The observations by the researcher also confirm the views of the participants as captured in the extracts above. The majority of the OVC that participated In this study, were not in school uniform. Their dressing was pathetic, threadbare clothes. I collected data in May and June 2016, and these being the winter months, one would expect children to wear warm clothes including shoes, but this was not the case with the OVC I interacted with. The majority of them, both boys and girls were barefooted and had no jerseys or jackets. As the FGDs were in progress, I saw some OVC shivering because of cold weather.

The principals and school counsellors concurred that a big proportion of in-school OVC dropping out during the winter season and resurfacing in summer because of lack of warm clothes. When the researcher asked principals and school counsellors about what the schools were doing to assist OVC with uniforms and warm clothes, they indicated that they approached

a faith-based organisation (FBO) which promised to provide the neediest OVC with uniforms. However, both principals and school counsellors were pessimistic of the fulfillment of the promise since they indicated that the promise had been made a year before.

The study also revealed that OVC confront the challenge of paying school fees. In-depth interviews with school principals indicated that the government pays school fees for some OVC through the BEAM. All three school principals concurred that the government had slashed the number of BEAM beneficiaries significantly since 2015, citing economic challenges. They revealed that this had left a substantial number of deserving learners without assistance. The principals also lamented late disbursement of BEAM funds for the few OVC catered for, highlighting that it impacts negatively on the running of the school. In tandem with principals' observations, one of the school counsellors said:

In some countries, there are school fees-waiver policies for OVC, I propose that our government should also come up with such a policy to cover these learners(SCM-A).

This view also came up in FGDs with OVC. The following verbal quotes confirm the observation:

Kana hurumende ikasaitibhadharira mari yechikoro, kutobva zvedu tagara kumba.Hurumende yedu ngaiise mari parutivi inokwana tose vanonetseka(FGD-B).

If the government neglects us, who will take care of us? The government should avail more funds to cater for the educational needs of OVC(FGD-B).

Komiti yechikoro pamwe haimboteerera zvichemo zvedu inodzinga. Paita saizvozvo tinotombonogara kumba tozouya kuchikoro vaenda(FGD-C).

Our attendance is erratic because of non-payment of fees. There are times when the School Development Committee will not listen to pleas from parents or guardians but insist on payment of fees. During such periods, we stay at home and resurface when the situation is calm(FGD-C).

School-counsellors and in-school OVC concurred that in-school OVC confront challenges in payment of fees, challenges that impact negatively on their education as they are often barred from attending lessons. The situation of in-school OVC school fees was noted to be worsened by inconsistent disbursement of BEAM funds which caters for school fees for some OVC.

5.3.2 Research Question 2: How Prepared Are Rural Primary Schools to Deal With Psychosocial Problems Confronted by In-school OVC?

The study revealed that OVC confront multifarious psychosocial problems which include discrimination, aggression, isolation, bullying, lack of concentration and stigmatisation. In-depth interviews with principals, school counsellors and FGDs with in-school OVC revealed that schools encounter challenges in addressing psychosocial problems of OVC because of factors which include lack of specialist counsellors, heavy teaching loads for teachers, teacher demotivation and limited workshops for principals and school counsellors. The following section examines each of the identified themes in terms of how they affect provision of psychosocial support to the in-school OVC.

5.3.2.1 Lack of specialist school counsellors

In-depth interviews held with three principals and six school counsellors showed that schools lacked specialist counsellors to provide OVC with quality psychosocial services. This observation is in agreement with the demographic data in Table 5.8 relating to the professional qualifications of the six school counsellors sampled. The data show that all six school counsellors held general diploma and degree qualifications in education. This situation may militate against the ability of schools to address the psychosocial needs of OVC. Although all three school principals and six counsellors agreed that the schools were providing psychosocial services, responses from FGDs with OVC were on the contrary. The contradictory responses relating to provision of psychosocial services by schools from different participants may mean that the schools were not providing psychosocial services systematically. The following verbatim quotes shed light on the situation in sampled schools relating to provision of psychosocial services to in-school OVC:

Yes, we do have school counsellors to guide and counsel children with problems such as OVC. I must However, hasten to point out that these teachers were not appointed on the basis of qualifications, but they volunteered to assist the school(SP-B).

Our school counsellors are doing a good job but I think if they can be workshopped they can do much better(SP-A).

The Ministry of Education should allocate each school at least one specialist counsellor, right now the teachers that are assisting in this area are not specialist and this compromises the services rendered (SP-C).

Extracts from the three school principals interviewed revealed that rural primary schools lack specialist school-counsellors to address the psychological needs of OVC. Lack of such critical services in schools impact badly on the welfare of OVC, a situation rural primary schools cannot afford to ignore.

The views of the principals were confirmed by the school counsellors as highlighted in the following extracts:

I am not a specialist counsellor but I have passion for the job. I am applying psychological theories I learnt at college to assist these children(SCF-C).

It is really a tough assignment. Yes, I volunteered to assist but I have since realised that I am not qualified to assist these children adequately(SCM-B).

Yes, I am one of the school counsellors dealing with problems affecting female learners but I am not confident with what I am doing because I am not a qualified counsellor(SCF-A).

Responses from school-counsellors on their capacity to provide psychological services to OVC indicate that they lack training in handling and dealing with OVC. This suggests that the service they offer to OVC is substandard hence need to be addressed.

FGDs held in the three schools with in-school OVC revealed that in two out of three schools, learners acknowledged that they were offered psychosocial support by school counsellors although they expressed that the service was rarely given. In school A, both male and female OVC indicated that they were not aware that there were counsellors in the school. The following excerpts demonstrate the sentiments of OVC in respect of psychosocial services offered in schools:

Chikoro chine varairidzi vaviri mukadzi nemurume vanotibatsira kana tine dambudziko(FGD-C).

The school has a male and female school counsellors who assist us in solving social problems, they are helping us a lot(FGD-C).

Ummm, ya mukuru wechikoro vakataura kutanga kwekotoro ino kuti pane varairidzi vachange vachiona nezvematambudziko anosangana nenherera nevamweo vanotambudzika(FGD-B).

Ummm, yes the school principal made an announcement at the beginning of this term that the school has appointed a male and female teacher as school counsellors. We seldom consult them because they are always complaining that they are not trained counsellors(FGD-B).

Mudzidzisi kutaura chokwadi, hatisikutomboziva kuti pane vadzidzisi vanobatsira vana vanenge vanematambudziko. Tirikutonzwa nemi. Isu kana tinedambudziko tinoenda kuna kirasi ticha vedu(FGD-A).

To tell the truth sir, we are not aware that there are counsellors in the school. We are hearing it from you for the first time. When we have problems, we go to our class teachers(FGD-A).

The views of in-school OVC captured in the above excerpts concur with the views of school-counsellors on the inadequacy of school-counsellors to assist OVC; this may explain their non-availability to assist OVC as highlighted by OVC during FGDS.

It also emerged from this study that the efficacy of school counsellors to carry out their mandate was compromised by lack of staff-development workshops in OVC-related issues. All three principals and six school counsellors concurred that the OVC phenomenon is a contemporary problem; hence the need to conduct workshops for school counsellors in order to equip them with the requisite skills. While all three principals and school counsellors viewed workshops as necessary, they lamented that the Ministry of Primary and Secondary Education was not conducting such workshops. The few workshops that were reported to have been conducted were sponsored by NGOs. According to the respondents lack of staff-development greatly compromised the capacity of schools to assist OVC. The following verbal quotes capture the sentiments of the respondents on this subject:

All our school-counsellors are not specialists that they need in-service training but there are no workshops being conducted. This makes their job difficult(SP-A).

Counselling of learners requires special skills particularly in the area of psychosocial problems. Material support, anyone can assist but psychosocial support is difficult so our school counsellors need training. At the moment, they have attended one workshop conducted by a non-governmental organisation(SP-C).

The extracts above indicate that the school principals blame the government for not availing funds to conduct workshops aimed at equipping school-counsellors with the requisite knowledge to assist in-school OVC. The sentiments of principals concurred with those of the school counsellors as highlighted below:

I volunteered to be a school counsellor anticipating that we will be trained through workshops on issues affecting OVC but up to now I have never attended a workshop that I am contemplating quitting the post (SCF-B).

We are not well-equipped to deal with complex psychosocial challenges affecting OVC. If the Ministry can in-service us in this area, we can help these children significantly(SCM-C).

Workshops are crucial; I attended one workshop 1st term this year which was conducted by a Non-governmental organisation. I benefited a lot that if the Ministry of Education can organise some workshops of this nature we can deliver quality service (SCF-A).

The responses from school-counsellors captured in the above excerpts indicate that school-counsellors were aware of their limitations in attending to the needs of in-school OVC and like their principals believed that workshops could address their problems. When asked about the topics covered at the workshop, one teacher, SCF-B who indicated that had attended a workshop mentioned the following:

- Inclusive education;
- Identification of OVC;
- Handling and dealing with OVC; and
- School-based projects to assist OVC.

Document analysis of the three schools' diaries of activity for the term revealed that there were no planned activities to do with OVC in these schools indicating a strong possibility that OVC issues were not taken seriously. FGDs with OVC in the three schools indicated that OVC had no information on the qualifications of their counsellors. The OVC indicated that they rarely received counselling services from the school counsellors.

5.3.2.2 Work load and the efficacy of school counsellors

This study found that the capacity of school counsellors to provide quality guidance and counselling services was militated against by the heavy teaching loads they were assigned in

addition to counselling. Interviews conducted with principals and school counsellors revealed that heavy workload was one of the main impediments to effective provision of psychosocial services to OVC by school counsellors. The following extracts support the finding:

The ministry policy is not clear on whether guidance and counselling is a stand-alone subject where school counsellors can be given a full teaching load. Because of that uncertainty we assign them guidance and counselling on top of the normal teaching load (SP-A).

The problem is that guidance and counselling is not an examinable subject so we tend to prioritise examinable subjects when assigning teachers teaching loads. Because of that we normally give school counsellors guidance and counselling as an extra load but we really feel we are overloading them but there is nothing we can do (SP-C).

The views of school principals as expressed in the extracts above show that they concurred that teaching of guidance and counselling in rural primary schools was hampered by heavy teaching loads assigned to school-counsellors and the negative attitudes of teachers towards non-examinable subjects like guidance and counselling. This could mean that the subject is not taken seriously by both school-counsellors and learners

The sentiments of principals were echoed by the school counsellors who castigated school principals and the Ministry of Primary and Secondary Education as insensitive to their plight.

We are allocated a normal load per week just like any other teacher; in addition, to that we are allocated guidance and counselling which is done across the whole school. This is an unbearable load which compromises quality of results in both examinable subjects and counselling services we offer (SCM-B).

The Ministry should declare school counsellors full-time counsellors so that quality guidance and counselling service is offered (SCF-C).

The school-counsellors interviewed concurred that they were overburdened by being assigned counselling duties on top of their normal teaching loads. Instead they suggested to be exempted from teaching in order for them to focus on counselling

Responses from FGDs conducted in the three schools supported the views and sentiments of principals and school counsellors on the issue of heavy workload militating against provision

of psychosocial services by school counsellors. The following extracts highlight the views of learners on the status of guidance and counselling school curriculum.

Vadzidzisi vechidzidzo che counselling havauyi kuchidzidzo ichi, kana vakauya vanoshandisa nguva yecounselling kudzidzisa zvimwe zvidzidzo zvinonyorwa bvunzo pakupera kwe gore(FGD-B).

School counsellors rarely attend guidance and counselling lessons, if they come, in most cases, the lessons are utilised to cover syllabi for examinable subjects(FGD-B).

Guidance and Counselling inoitwa masikati tabva kundosvuvura. Kazhinji kacho mudzidzisi anenge atoneta zvokuti hapana chaanozoita chinotibatsira (FGD-A).

Guidance and Counselling slots are in the afternoon, that when school counsellors come they complain of fatigue and will not do much. In short, we are not benefiting much from the teachers (FGD-A).

The views of OVC corroborate the views of school counsellors that guidance and counselling was not systematically taught in the sampled rural primary schools, an issue which all participants considered as detrimental to the in-school OVC.

5.3.2.3 Lack of support of school counsellors by the school administration.

The study established that one of the factors that hampered the provision of psychosocial services to OVC by school counsellors was lack of support from principals, fellow teachers and the Ministry of Primary and Secondary Education. With regard to lack of support from school principals, counsellors indicated lack of specialist rooms in schools to conduct guidance and counselling especially where one-on-one counselling was called for. Other resources indicated to be inadequate by counsellors and therefore compromising their mandate included relevant textbooks and technology such as projectors and computers. They argued that principals do not allocate funds for procurement of materials they request in order to guide and counsel learners effectively.

It also emerged from the study that school principals rarely consult school counsellors when drawing up diaries of school events which culminates in limited time allocated to guidance and counselling activities. The following extracts capture the views and sentiments of the school counsellors on this subject:

Some OVC present problems that may require one-on-one counselling and you need a special room to do the job, but the situation in our rural schools in terms of infrastructure is pathetic, you end up resorting to group counselling which may not work(SCM-B).

The problem with our principals is that they lack information on the role function of counsellors; as a result, they rarely consult us on issues to do with guidance and counselling school programme. I assume this is why the subject is allocated one lesson per week which is normally done in the afternoon when learners are tired(SCF-C).

With respect to teaching-learning materials, SCM-A said:

Our principal lacks knowledge of the value of guidance and counselling programme to learners, he does not support the purchase of textbooks and other materials we order through his office, yet orders for examinable subjects are approved timeously.

All the school counsellors concurred that the Ministry of Primary and Secondary Education was not supporting guidance and counselling since there was a dearth of staff-development workshops. The school counsellors also indicated lack of support from other teachers as hampering their work. For instance, SCF-B said:

At times, we are demotivated by comments from our colleagues who give us derogatory names like 'nurse aid', 'social welfare officers.

The school-counsellors expressed disappointment on lack support from school administrators to provide basic things like specialist rooms where one-on-one counselling can be done. In addition they indicated lack of support from colleagues as another militating factor in the provision of quality service to in-school OVC, for example they observed that some teachers always refer learners for counselling to them even over petty issues any teacher can handle.

5.3.2.4 The utility of peer counsellors and kids clubs in OVC care and support.

This study established that there were no peer counsellors or 'kids' clubs' in all three sampled schools. Peer counsellors and kids' clubs are critical in the provision of psychosocial service in schools (Neuman & Neuman, 1997:55; Nyangara, 2009:47). According to Neuman and Neuman (1997:58), if caring and support structures are not provided by a family, children tend to seek support from alternative sources such as peers, partners and educators. The researcher contends that in the context of schools, peer counsellors and kids clubs can fill the void by

providing care and support to in-school OVC. The non-existence of such structures in the sampled schools implies that the capacity of schools to address the psychosocial needs of in-school OVC is limited. When the researcher asked school counsellors and principals on efforts being made by schools to address the psychosocial needs of in-school OVC, peer counsellors and kids clubs were not mentioned indicating their non-existence in the sampled schools. When I probed both principals and school counsellors on the matter, they confessed ignorance about peer counsellors, kids clubs and their functions and this may serve to indicate that there are limited interventions in schools aimed at addressing the psychosocial needs of OVC.

5.3.3 To What Extent are Teachers Competent in Dealing with OVC?

This section focuses on the capacity of teachers to deal with challenges encountered by in-school OVC. To address the area, three sub-themes will be treated and these are: teacher-administration training; teachers' conditions of service; and teacher attitudes as well as implementation of guidance and counselling.

5.3.3.1 Teachers and administrators training in dealing with OVC

According to UNESCO (2008:44), specific training is required in order to expect quality services from a teacher or any other skilled professional. Teacher training is determined by a number of factors but chief among them is curriculum change. Because curriculum changes, teachers should be trained and retrained to upgrade and align their skills with new developments (UNESCO, 2008:44). This need for training also applies to Zimbabwean teachers where curriculum change has been going on which includes the introduction of a guidance and counselling programme. With regard to teacher and administration training to implement guidance and counselling as well as handling and dealing with OVC, this study found that teachers and administrators were ill-trained. Interviews with principals and school counsellors indicated that both teachers and administrators lacked skills and knowledge to implement guidance and counselling curriculum and addressing the needs of in-school OVC.

Principals and school counsellors concurred that all teachers in the schools did not receive training in guidance and counselling during pre-service training. The main reason given by both teachers and administrators for lack of training was that OVC and guidance and counselling became part of the school curriculum after teachers completed their pre-service training. The participants bemoaned the lack of staff-development workshops which could equip them with knowledge and skills to teach in classrooms where a large number of learners

are vulnerable. Teacher training in respect of OVC care and support is critical to the well-being of OVC. Thus, Clarke (2008:74) observed that “Those teachers, who take up the duty of care and assume the role of parent at school (in loco parentis), are viewed as ‘heroes’ in the classroom”. With regard to teacher training in OVC care and support, Human Rights Watch (2005:6) advocated for reorientation of the curriculum in both pre-service and in-service training programmes to include the following components:

- training teachers or school counsellors address bereavement issues;
- supporting school-based peer-support groups;
- liaising with community-based organisations to identify the most vulnerable children; and
- Sensitising educators to the needs of OVC.

The following excerpts capture how teachers and administrators view their training in the context of OVC care and support:

As an administrator who oversees the implementation of school programmes, I feel ill-equipped to supervise implementation of guidance and counselling school curriculum(SP-B).

The problem is that the ministry rushes to introduce new things in the curriculum before training the implementers of the curriculum. With regard to OVC care and support, guidance and counselling should be of value but the challenge is that both administrators and teachers are not adequately trained to assist these learners(SP-C).

Because teachers are ill-trained to assist OVC, the burden of handling OVC problems is shouldered by those teachers who although not trained volunteered as school counsellors(SCM-A).

Our situation is worsened by the Ministry of Primary and Secondary Education’s reluctance to conduct workshops to prepare teachers and administrators to assist in-school OVC effectively(SCF-B).

The views of school administrators and school-counsellors expressed in the above extracts indicate that they acknowledged their inadequacies in assisting in-school OVC and expressed the desire to be trained in order to be more effective in handling and dealing with OVC.

5.3.3.2 Teachers' conditions of service and teacher attitudes towards OVC.

This study established that the teachers' capacity to assist in-school OVC was impacted negatively by the appalling conditions of service they operate under, which culminates in teachers developing a negative attitude towards their work including OVC care and support. Symeonidis (2015:28) states that pay benefits and working conditions affect teachers' occupational status and self-esteem. He further elaborated that improvement or decline in salaries and working conditions has a proportional impact on the status of the teacher.

The participants in this study concurred that rural schools lack infrastructure such as classroom facilities, teaching-learning resources and leisure activities. Principals and school counsellors revealed that due to lack of classroom facilities in rural schools, some classes are held under trees during dry season and when rain season comes learners are crowded into the few available classrooms. Such conditions were noted to demotivate rural teachers, which in turn compromised their productivity including assisting in-school OVC.

The disgruntlement of participants due poor infrastructure in rural schools is captured in the extracts below:

Our biggest challenge is lack of classroom facilities. Rural parents struggle to raise fees; as a result we cannot construct new classrooms. Half of our classes are conducted in open air. Such a situation demotivates teachers that we cannot expect the best out of them(SP-C).

Teachers are always complaining for conducting lessons under trees that when asked to take extra responsibilities such as OVC care and support, they resist. May be if the government can chip in to assist schools in constructing classrooms(SCF-A).

On conditions of service, school principals and school-counsellors concurred that lack of infrastructure which force some school-counsellors to counsel OVC under trees demotivates counsellors and that the situation should be addressed as a matter of urgency. Rural primary schools were viewed as incapable to construct adequate infrastructure due to financial constraints hence the intervention of other stakeholders in this regard was suggested.

The sentiments of principals and school counsellors were corroborated by learners during focus group sessions. Thus, FGD-C said:

Vadzidzisi vanenge vasina mufaro kana tichidzidzira panze. Naizvozvo havazoita basa ravo nemazvo kusanganisira kubatsira vana vanotambudzika.

Teachers will be in low spirits when conducting lessons in open air that the quality of their work is negatively affected. OVC care and support in such circumstances suffers(FGD-C).

The learners also identified demotivation of teachers as a factor that negatively affects the quality of counselling offered to in-school OVC by school-counsellors. The learners' views as captured in the above extracts concur with the views of school-counsellors and school administrators. This could mean that demotivation of teachers needs to be addressed in order to improve care and support of in-school OVC.

5.3.3.3 Implementation of guidance and counselling programme.

A guidance and counselling programme was introduced in Zimbabwean schools with a view to enhancing personal, social and academic development of students and assisting them to make career choices (Mapfumo & Nkomo, 2013:10;Nkala, 2014:23). Document analysis of time tables, schemes of work and diaries of activities of the sampled schools indicated that the programme is part and parcel of the school curriculum. The guidance and counselling programme was timetabled and schemed for by teachers. The programme was, however, not reflected in the diaries of activities of all three sampled schools which may mean that the programme is trivialised.

Interviews with principals and school counsellors on the implementation of the guidance and counselling programme revealed that it was fraught with challenges. The challenges raised by both principals and school counsellors include, inter-alia, lack of trained school counsellors, lack of textbooks, specialist rooms and negative attitudes towards the programme by both school principals and school counsellors. It emerged from this study that both the principals and school counsellors were not knowledgeable about the contents of the Ministry of Primary and Secondary Education Circular Minute number 51 of 1992 which provides parameters for the implementation of guidance and counselling programme in schools. Boitt (2016:14) asserts that the success of guidance and counselling programmes depends on the knowledge and attitudes of service providers. FGDs held with learners in the sampled schools revealed that guidance and counselling were not taken seriously by principals, teachers and learners, possibly because it is not an examinable subject. The following extracts support the finding:

Guidance and Counselling iripo paorongwa hwezvidzidzo zvedu asi vadzidzisi havasi kuikoshesa vanotodzidzisa zvimwe zvidzidzo zvakaita semasvomhu ne Chirungu panguva ye guidance and counselling (FGD-B).

Guidance and Counselling is timetabled however, more often than not teachers teach other subjects during guidance and counselling slots instead(FGD-B).

The above extracts are views of OVC captured during FGDs. The OVC indicated that guidance and counselling was implemented in a haphazard manner due to many reasons which include non-examination of the subject and lack of training of teachers in teaching the subject. Against this backdrop, it can be inferred that the successful implementation of guidance and counselling in Zimbabwean rural primary schools could be a reality if teachers and principals were trained in OVC care and support. The following section focuses on structures in rural primary schools aimed at addressing the needs of in-school OVC.

5.3.4 Research Question 4: Are There Structures in Rural Primary Schools Targeting Support of OVC?

On the question of whether there were structures in schools meant to assist OVC, all the respondents, three principals, six school counsellors and 15 OVC indicated that they were in place, although limited. The respondents mentioned the BEAM committee, school counsellors, clubs and school-feeding committees. The following section focuses on each of the structures mentioned to establish their utility in addressing the needs of OVC.

5.3.4.1 Structure and function of the BEAM committee

Data gathered through interviews and FGDs revealed that each school had a BEAM committee. All three principals concurred that the mandate of the BEAM committee was to vet in-school OVC and recommend them for government sponsorship to cover their school fees. They indicated that the committee comprised members of the community and the school administration. All the participants indicated that BEAM did not cater for all deserving learners; only a small number were catered for. It also emerged from the study that BEAM committees were not fair in that some learners from well-to-do families could be recommended to benefit from BEAM at the expense of deserving vulnerable children. The respondents also lamented the late disbursement of BEAM funds and their limitation of covering tuition fees only. The following verbatim quotes from the participants support the findings:

Yes, we have a BEAM committee here made up of three community members and the school administration. The role of this committee is to choose the most deserving OVC and recommend for fees payment by government through BEAM(SP-B).

It is a difficult task to be a BEAM committee member, there are quite many in-schools OVC who need assistance yet BEAM covers a small proportion of the vulnerable children. Against this background, coming up with a final list is not easy(SP-C).

The BEAM committee is there yes, but it is fraught with problems. Children from well-to-do families are recommended ahead of OVC, it's not fair(SCF-A).

BEAM caters for school fees only. It should also cover school uniforms and stationery; that way the educational needs of OVC can be improved(SCM-C).

The extracts above indicate that both the school principals and school-counsellors acknowledged the existence BEAM committees in their schools. However they concurred that the committees were not effective in carrying out their mandate of identifying and recommending needy children for assistance through BEAM, due to nepotism and other unfair practices.

The sentiments expressed by the principals and counsellors were also echoed by OVC during FGDs. The following verbal quotes illustrate the finding;

Ndinobhadharirwa mari ye Chikoro ne BEAM, pamwe vadzidzisi vanombondidzinga mukirasi nokuda kwekusainyora nokushaya zvokushandisa(FGD-A).

I am a BEAM beneficiary but at times I miss out lessons because of lack of stationery such as exercise books and pens(FGD-A).

[Handina vabereki, asi handina kupinzawa muBEAM asi vamwe vanotombova nomubereki vakasarudzwa kupinda mu BEAM panehuori apa (FGD-C).

I am a double orphan, but I was left out of the BEAM programme yet some children from well-to-do families are catered for. The BEAM committee is not fair(FGD-C).

BEAM funds are paid so late that even if you are a beneficiary of the scheme at times you are sent away by the school development committee to collect fees(FGD-B).

Document analysis of BEAM records done by the researcher in the three schools confirmed that each school had a BEAM committee, a list of BEAM beneficiaries, as well as a consolidated list of all in-school OVC. The next sub-heading covers the school-feeding scheme as one of the interventions implemented to meet the material needs of in-school OVC.

5.3.4.2 The school-feeding scheme committee

In-depth interviews with principals and school counsellors revealed that each of the three schools had a school-feeding committee comprising community members and two senior teachers. FGDs with OVC showed that they were not aware of the existence of a feeding scheme committee. The principals and counsellors concurred that the committee had been dormant since 2013 when the school-feeding scheme sponsored by Care International stopped. They were optimistic that the committee would soon become active with the resuscitation of the school-feeding scheme sponsored by the government although on a smaller scale compared to the one which was operational before 2013. Documents analysed revealed that the feeding scheme sponsored by the government only caters for pre-school and infant learners, a situation viewed by all the participants as unfair.

5.3.4.3 School counselling and the welfare of in-school OVC

School counselling is one of the strategies mentioned by all the participants as being implemented in schools to address the psychosocial needs of OVC. Although principals and school counsellors demonstrated some knowledge of the value of school counselling in addressing the psychosocial needs of the OVC, they indicated that a lot needs to be done to train teachers and principals in order for them to assist OVC effectively. All the participants in this study indicated that school counselling in schools was not effective as teachers and principals were not taking the programme seriously because of factors such as lack of training, lack of resources and infrastructure as well as the fact that guidance and counselling is non-examinable. With regard to training in respect of counselling, Nkala (2014: 85) indicates that in developed countries, a professional school counsellor is expected to be a licensed teacher with graduate level training in counselling and should demonstrate competence in knowledge, skills and attitude. Principals and school counsellors interviewed highlighted some benefits of school counselling to OVC which include the development of a sense of belonging, sense of safety, interpersonal relations and positive self-concept. In the same vein, Yuksel (2003:195) states that guidance and counselling is critical in schools in that counsellors attend to the learners' educational, vocational, emotional social and personal development. Below are

the views and sentiments of the participants on school counselling as an intervention strategy to address the psychosocial needs of in-school OVC.

School counselling if well supported can be the panacea to the psychosocial challenges confronting in-school OVC (SP-A).

School counselling which encompasses teaching of guidance and counselling programme, peer and kids' clubs is critical to addressing of psychosocial needs of OVC but we are not adequately equipped to implement it (SP-C).

School counselling is not implemented honestly at this school, yet there are so many OVC who need the services of specialist counsellors (SCF-B).

From the views of school principals captured in the above extracts, it is clear that all the school principals concurred that guidance and counselling if implemented in schools and adequately supported by the Ministry of Education and Culture can empower schools to respond to the psychosocial needs of in-school OVC.

Pamwe tinenge tine zvinotinetsa asi toshaya munhu mukuru watingataurira zvinotinetsa. Dai pachikoro vadzidzidzisi ve counselling vaiita basa nemazvo zvaitibatsira (FGD-A).

Some of us we need adults to open up our hearts on the challenges that we encounter that in the context the school; counsellors can play the role (FGD-A).

The views of in-school OVC expressed in the above excerpts indicate that learners confront problems that need the attention of adults such as school-counsellors to address. The situation in the sampled rural primary schools in this regard begs attention.

5.3.4.4 Implementation of fundraising projects

In-depth interviews with principals, school counsellors and FGDs with OVC revealed that two out of three schools were running some fundraising projects intended to assist OVC, while one school had no projects due to financial constraints. The principals and counsellors of schools A and B that were running some projects indicated that the projects were not raising enough funds to assist OVC adequately. The following verbatim statements by participants support these claims:

The school is running a poultry project to raise funds for payment of fees for OVC (SP-P).

We have a club comprising teachers and learners that is selling sweets to buy stationery for some OVC but the project is not raising much (SP-A).

We really want to engage in some fundraising projects to assist needy learners but we do not have capital (SP-C).

The poultry project run at this school is sponsored by a non-governmental organisation in order to raise tuition for some OVC (SCM-B).

I think if we can have a borehole we can grow vegetables on a large scale so that we can sell to assist some of the OVC, but at the moment we are not doing anything as a school to assist these children (SCF-C).

The extracts above indicate that school principals and school-counsellors concurred on the utility of school-based projects in addressing the material needs of in-school OVC. It also emerged from their responses that lack of funds was hampering implementation of school-based projects. FGDs held with OVC confirmed the views of principals and counsellors. Some OVC said this about school-based projects:

Tinochengeta huku senzira yokuwana mari inozobatsira vana vanotambura asi mari yacho ishoma zvokuti parizvino vana vaviri chete ndivo varikubatsirwa(FGD-B).

We run a poultry project but the money from the project covers school fees for two OVC only. If the project can be expanded may be more OVC can also benefit (FGD-B).

Hapana project yatinoziva pachikoro pano yakanangana nevana vanotambura kunze kwe BEAM (FGD-C).

There is no project targeting OVC here, the only programme we know that helps OVC is BEAM (FGD-C).

Pano paimbova neclub yaitengesa ma sweets asi yakafa. Hameno kuti chii chakaita kuti isaenderera mberi (FGD-A).

There used to be a club which was selling sweets but is no longer functional. We don't know what led to the collapse of the project (FGD-A).

The views of in-school OVC captured in the above extracts confirm the views of school principals and school-counsellors that there were no viable school-based projects in the sampled rural primary schools to meet the material needs of in school OVC. Against this background partnership between rural primary schools and other stakeholders like NGOs becomes necessary.

5.3.5 Empowerment of Rural Primary Schools to meet the Needs of OVC

The participants were asked to suggest ways of improving the well-being of in-school OVC and the following strategies emerged:

- Each school should have a full-time specialist school counsellor.
- All principals and teachers should be trained to handle and deal with OVC.
- Government and donor community should sponsor projects in schools to raise tuition for OVC.
- Government and NGOs should sink boreholes at schools so that they can embark on nutritional gardens.
- Traditional leaders should allocate schools pieces of land big enough to farm and provide food to the in-school OVC.
- Schools should initiate child clubs or peer counsellors to assist OVC.
- Collaboration of schools and the community in projects that assist OVC; for instance, the Zunde ra Mambo.
- Government should improve conditions of service for teachers to motivate them to work including assisting OVC.

5.4 DISCUSSION OF FINDINGS

This section discusses findings of the study following themes that emerged from analysis of empirical data.

5.4.1 Provision of Material Needs to In-School OVC in Rural Primary Schools

The aim of this study was to find out the extent to which rural primary schools respond to the needs of in-school OVC. Research question 1 focused on the capacity of schools to address the material needs of in-school OVC and data collected around this question generated four sub-themes, namely food and nutrition, provision of stationery, payment of fees and uniforms. Discussion of results in this section follows the themes and sub-themes identified.

5.4.1.1 Food and nutrition and the situation of in-school OVC

This study revealed that one of the major challenges confronting OVC is lack of food. The participants indicated that OVC came to school with no lunch boxes indicating incapacity of caregivers to support them adequately. This finding confirms the rupture thesis which suggests that traditional family structures and social support system of OVC are over- stretched and eroded that they cannot cope with the increasing number of OVC (Omwa & Titeca, 2011:10). To Omwa and Titeca (2011:11), the family and community have been weakened by social rupture such as high death rate due to HIV/ AIDS among the productive age leaving OVC under the care of old and poor caregivers. Against this background, the rupture theory advocates for external intervention in supporting and caring for OVC such as institutional care and involvement of NGOs. It is in the context of institutional care that the researcher views school as critical in supporting and caring for in- school OVC.

The major cause of hunger cited by all the participants in the sampled schools was the El-Nino-induced drought, which made many families vulnerable. The participants also lamented the termination of support by NGOs such as Care International, which used to sponsor school-feeding schemes. All the participants agreed that the termination of NGOs' support of school-feeding schemes in rural areas worsened the plight of in-school OVC. It emerged from the study that rural primary schools were not able to sustain school-feeding schemes on their own because the school fees charged were minimal. All three principals interviewed concurred that they could not purchase adequate teaching and learning resources because of financial constraints, let alone feed school children. It also emerged from the study that OVC's school attendance was erratic and that they could not concentrate in class as they became weary because of food deficiency. This finding resonates with Maslow's hierarchy of needs theory which views physiological needs as basic such that they should be satisfied first before higher needs such as education are met (Berg & Theron, 2009:132). Similarly Mwamwenda (2004:239) suggests that learners should be provided with adequate nutrition both at home and school. This is critical in so far as food improves concentration and participation of learners in class. However, the finding of the current study indicates that learners, particularly OVC, were not catered for in terms of food by both the community and schools. The principals indicated that lack of a comprehensive school-feeding scheme took its toll on learners especially OVC who often fainted in class or dropped out because of hunger.

The findings of the current study in relation to lack of food and nutrition for OVC concur with earlier studies. For instance, Germann's (2005) study in Zimbabwe revealed that OVC suffer from food insecurity, malnutrition and poor hygiene. Similarly Nyamukapa, Foster and Gregson's (2005) study on orphans' household circumstances in Zimbabwe also revealed that OVC encounter challenges such as access to food. Several studies (Masuka *et al.*, 2012: 7; Munyati *et al.*, 2008:15; Tsodzo, 2007: 50) established that OVC were more disadvantaged than non-OVC in health and nutritional status. The plight of OVC in respect of lack of food and nutrition could have been aggravated by poverty penalty. According to Haralambos and Holborn (2008:636), and Giddens (2009:515), poverty penalty is the negative impact of the poverty on children. Poverty penalty compromises the ability of parents, guardians and caregivers to provide children with school uniforms, food and learning materials (Giddens, 2009:515).

In Zimbabwe, many children have been made vulnerable because of a number of factors which include drought, HIV/AIDS and economic challenges confronting the country. In this regard, Asante (2012:2) highlighted that poverty in Zimbabwe was worsened by political instability and targeted sanctions that led to economic hardships in the country. Political instability has seen the withdrawal of NGOs from the country, some of which, like Care International were critical in sponsoring school-feeding schemes and nutritional gardens. It emerged from the study that schools could not afford feeding schemes because of financial constraints. It also emerged from the study that the government through the Department of Social Welfare was sponsoring a school-feeding scheme in rural primary schools, a scheme which was viewed by all participants as insignificant in that it only catered for infant classes. Judged against the vision of the NAP I and II for OVC, it can be drawn that the government has failed to fulfil the vision. The vision of NAP I states that the government aims to reach out to all OVC in Zimbabwe with basic services such as food, health services and sanitation (NAP, 2004). Similarly, NAP II which came into effect in 2011 aimed to provide a framework for coordinated action to ensure that OVC and their families access basic services (MLSS, 2011:7). The failure by government to sponsor a comprehensive school-feeding scheme implies that a large proportion of in-school OVC are likely to drop out because of hunger.

In the same vein, Smart *et al.* (2003:108) argues that schools are rights-based institutions which should offer services such as delivery of a daily meal to OVC. The findings of this study in respect of non-availability of nutritional gardens and an effective feeding scheme are inconsistent with Smart *et al.*'s (2003:108) observation. This entails the need for stakeholders

in education to step up efforts in order to make schools responsive to the material needs of OVC. In addition, Bronfenbrenner's (1979:40) ecological theory views the school as a crucial component in the development of a child. According to Bronfenbrenner's (1979) model, the school and the family constitute the microsystem. The microsystem is the inner most layer of the ecological model representing the immediate environment of the child (Bronfenbrenner, 1979: 40). To Bronfenbrenner (1979: 41) interactions that occur in the microsystem, the family and the school either encourage or discourage the fulfilment of the needs of a child. Viewed in the context of Bronfenbrenner's ecological system, the school should create a conducive environment for the development of a child which includes provision of material needs such as food and nutrition.

Furthermore, Lewthwaite (2011:19) posits that, at school, children depend on teachers for guidance, support and parenting until they return home. This implies that schools should go beyond provision of academic services and support learners particularly OVC materially and psychologically. Failure to provide children material support such as food impacts negatively on their well-being (UNICEF, 2009:8).

5.4.1.2 Provision of stationery and educational opportunities of OVC

The current study revealed that OVC encounter the problem of stationery in schools. Analysis of empirical data from interviews with principals, school-counsellors and FGDs with OVC, indicated that schools were not providing learners with stationery. Provision of stationery such as exercise books, pens, book covers and rulers was found to be a responsibility of parents or guardians in all three schools. All three principals interviewed attributed failure by schools to provide learners with stationery to financial constraints emanating from non-payment of school fees by learners, and delays in disbursement of funds for those learners assisted by BEAM.

It emerged from the study that OVC were the hardest hit by non-provision of stationery by schools. Interviews with school counsellors revealed that some of the disciplinary issues that they handled involve stealing of exercise books, pens and rulers from fellow learners by OVC. FGDs with OVC also confirmed the school counsellors' observations as some OVC expressed that they stole stationery from fellow learners because their caregivers could not afford to buy them. Some even indicated that lack of stationery was the major cause of their erratic school attendance.

Haralambos and Holborn (2008:605) also observed that poor families impact the education of children in a number of ways, which include inability to buy relevant learning materials. The importance of stationery in terms of the educational opportunities of a child was also highlighted by Vander Zalm (2010:26) that children who are provided with adequate material such as books, perform better than those who lack such basic provisions. This study also found out that some OVC were chased out of classrooms by teachers for not writing because of lack of stationery. This highlights that the socio-economic circumstances of OVC impact negatively on their educational opportunities. The experience of the researcher as a teacher for 17 years affirms that learners benefit from the teaching-learning process when they participate in the learning activities such as writing exercises. If OVC fail to write exercises and tests because of lack of stationery as has been revealed in the current study, it is evident that their educational opportunities are limited.

The findings of this study regarding lack of stationery are consistent with earlier studies conducted in Zimbabwe. For instance, Chinyoka (2013:163) observed that without textbooks and other teaching and learning resources, quality education in schools cannot be attained. This observation resonates well with the situation of OVC in the three sampled schools where most OVC reported that their learning was compromised by lack of stationery. Chandiwana's (2009) study also indicated that OVC encounter challenges such as lack of food and stationery. Similarly, Masuka et al. (2012:5) and Muronda (2009:61) revealed that the extended family has been overstretched by the rising number of OVC, and is no longer able to support OVC adequately. Evaluated against the rupture and resilience theories of OVC care and support, the findings of the study support the rupture theory which asserts that the family and other community care systems of OVC are rupturing and incapacitated to support OVC (Abede & Aase, 2007:2064). On the other hand, the findings contradict the resilience theory which purports that the family and the community evolve and adapt to the challenges presented by the OVC phenomenon. However, the situation of OVC as revealed in the current study did not show efforts by the family and community to help in-school OVC with stationery. Only one out of three schools reported that about two OVC's tuition fees and stationery were provided by a non-governmental organisation.

The findings of this study relating to provision of stationery to in-school OVC are consistent with Bourdieu's (1986) and Coleman's (1988) social capital theories. According to Coleman (1988:109) the family background affects the child's educational achievement. Coleman's theory comprises three different forms of capitals all of which are important in the educational

achievement of a child and these are financial, human and social capitals. The financial capital refers to the family's wealth and provides the physical resources that aid a child to achieve in education. The inability of caregivers to provide in-school OVC with stationary implies that their financial capital was weak. Bourdieu's (1986) concept of social capital also emphasises on the economic capital which corresponds with Coleman's financial capital. Bourdieu (1986: 240) posits that the possession and access to the economic capital is the basis of all capitals and that those that possess and access economic capital achieve higher in education because they are adequately provided with teaching-learning materials. The stationary problem faced by the in-school OVC reported by the participants could mean that their economic capital and all other forms of capital dependent on it were weak.

5.4.1.3 Payment of school fees and educational opportunities of OVC

The current study indicated that OVC encounter problems in the payment of school fees and purchase of school uniforms. Interviews with principals and school counsellors as well as FGDs with learners revealed that schools insisted on the payment of school fees and wearing of school uniforms by all learners.

The information collected from participants through interviews and FGDs revealed that some OVC's tuition was paid by the government through a programme called BEAM. This was also confirmed by document analysis which showed that in all three sampled schools, there were lists of BEAM beneficiaries. BEAM is a programme meant to support vulnerable learners in payment of tuition fees, school levies and examination fees (Masuka et al., 2012:3; Maushe, 2014: 13). It emerged from the study that BEAM programme was fraught with challenges which impacted negatively on the education of OVC. One of the challenges of the programme highlighted by all participants in this study, was late disbursement of BEAM funds to schools, which at times, forced SDCs to send away BEAM beneficiary learners for non-payment of fees. It was indicated that this would keep BEAM beneficiaries out of school for a considerable period of time thereby disadvantaging these learners in terms of syllabi coverage. The study also revealed that the government had reduced the number of BEAM beneficiaries drastically citing economic challenges. This implies that a large proportion of OVC were left out. All three principals interviewed concurred that there was no fees-waver policy for OVC in their schools hence OVC were not treated differently in respect of payment of fees. The findings of the current study confirm findings of previous studies done in Zimbabwe (Garutsa, 2012; Masuka et al., 2012, Munyati et al., 2006). These studies revealed that a number of OVC were not

covered by the BEAM programme; hence they dropped out of school. One of the challenges of the BEAM programme cited in the previous studies and confirmed by the current study was the subjectivity of the selection committee in selecting BEAM beneficiaries. This saw a large number of OVC not getting the assistance they deserved.

The findings of this study corroborate Asikhia and Mohangi's (2015) study in South Africa, which revealed that school support for OVC was not adequate. Similarly Ganga and Chinyoka (2010:190) indicate that OVC encounter challenges such as school fees and insufficient clothing. This observation calls for concerted efforts by all stakeholders to assist in-school OVC.

Evaluated against the provisions of the UNCRC (1989), Article (28) and Article 65 of UNGASS, to which Zimbabwe is a signatory, it can be drawn that the findings of the current study are at variance with international policies on education. Article (28) of the UNCR encourages state parties to make primary education compulsory and available to all. It further encourages countries signatory to the Convention to take steps to ensure regular school attendance and reduction of dropouts. In the light of the above, I argue that the government should not have cut the budget for the BEAM programme; instead, it should have engaged the corporate world and NGOs to assist as many OVC as possible. In the same vein, Article 65 of UNGASS stipulates that OVC should not be denied basic education (UN, 2001). Consistent with the international policies on education is the Zimbabwe Education Act 25.40 (1987 Part 4 (1) and (2)), which states that every child has a right to education and that there should be no discrimination of children in school admission. The issue of school fees hindering OVC's retention in Zimbabwean schools was also observed by Chase et al., (2004). Similarly, Munyati et al.'s (2006) study in Zimbabwe revealed that a third of OVC were not going to school because of lack of school fees and uniforms.

The current study revealed that, in all three primary schools, there were no fundraising projects viable enough to pay school fees for OVC. The only school which indicated that it had a poultry project (School B) reported that the project was not productive enough; as a result, only two OVC were catered for with regard to school fees. Another challenge encountered by OVC highlighted by all the participants was lack of school uniforms. The following section will focus on this problem and how it affects school attendance for OVC.

5.4.1.4 School uniforms and the education of OVC

Lack of school uniforms among in-school OVC was reported by all participants in this study. It emerged that schools insisted on all learners to be in school uniforms as a matter of policy. All three principals indicated that the policy on school uniforms was difficult to implement in rural areas where most learners are vulnerable. All the principals and school counsellors interviewed concurred that, at times, OVC were allowed in school without uniforms. The observations made by the researcher during the fieldwork confirmed the principals and counsellors' views. I observed that the majority of OVC who participated in this study were not in school uniform. Some were barefooted and wearing torn clothes. Commenting on the efforts made by the schools to assist OVC with uniforms, all three principals cited financial constraints of their schools as the major challenge and indicated that the gesture they could extend to OVC was to allow them in school wearing casual clothes.

The findings of this study confirmed findings of a study in Botswana by Tsheko (2007), which revealed that OVC lacked clothes. Similarly, Seruwagi's (2013) study in Uganda and Datta's (2009:4) study in Kenya indicated that poverty impacts negatively on the ability of OVC to cover costs of items such as uniforms. Similar research in Zimbabwe revealed that OVC face challenges in procuring school uniforms (Chase et al., 2004:23; Maushe, 2014:13; Munyati *et al.*, 2006:43). In addition, Munyati et al. (2006:45) commented that not being in school uniform singles out OVC from fellow learners. This observation concurs with sentiments expressed by OVC in this study, as they indicated that they envied their classmates who were in complete school uniforms. All the participants in this study indicated that the situation of OVC in respect of procurement of uniforms was worsened by the non-coverage of costs of uniforms by the BEAM scheme. This observation supports Maushe's (2014:11) finding that school uniforms and stationery for BEAM beneficiaries were financed by their parents or guardians. In this sense, the parents and guardians of BEAM beneficiaries were expected to raise large amounts of money to pay for non-school fee related expenditure such as uniforms. This study revealed that this responsibility was so heavy for most parents and guardians that they could not afford them. It also explains the incidence of a high proportion of OVC in the three sampled schools with no school uniforms.

FGDs held with OVC in the three primary schools revealed that the self-esteem of learners was bruised by lack of school uniforms. This affirms Muchenje's (2008:37) findings which indicated that OVC were discriminated against and stigmatised in schools due to lack of

uniforms. The current study also found out that OVC's attendance was erratic due to challenges which included, inter-alia, lack of school uniforms and warm clothes. Absenteeism and other poverty related factors such as lack of stationery were reported by the participants in this study, to have a negative impact on the education of OVC. This observation is consistent with the findings of earlier studies (Lekhetso, 2013:388; Salaam, 2004:10; Nziramasanga, 1999:194) which indicated that poverty impacts on the academic performance of learners. The findings of this study in respect of lack of school uniforms are, however, inconsistent with the findings of Campbell et al.'s (2014:445) study, which revealed that schools were supporting OVC through the provision of books, food and uniforms.

The contradiction of the results of the current study and Campbell et al.'s (2014) study could be understood in the context of different political, social and economic developments that occurred in Zimbabwe from 2009 to 2016, the period during which Campbell et al. (2014) study and the current study were conducted. In 2009, the Government of National Unity (GNU) was formed between the Zimbabwe African National Union-Patriotic Front (ZANU-PF) and the Movement for Democratic Change (MDC). During the GNU period from 2009 to 2013, a number of NGOs came in to sponsor various programmes in schools, such as school feeding schemes, nutritional gardens to mention just a few. It can be inferred that some of these NGOs were still operating in Zimbabwe by 2014 when Campbell et al. (2014) carried out their study; hence, schools were found supporting OVC adequately. On the other hand, the demise of the GNU in 2013 saw the straining of relationships between the ZANU-PF government and some NGOs resulting in a large number of these organisations withdrawing their support in a number of sectors including education. It is in this era that the current study was conducted; hence, the disparity in the findings. Against this backdrop, it can be extrapolated that schools need external support to respond to the needs of OVC meaningfully. In this respect, Munyati et al. (2006:43) recommended that schools should form partnerships with intervention agencies in order to be capacitated to handle challenges confronting OVC. Another theme which emerged from this study relates to psychosocial needs of OVC discussed in the following section.

5.4.2 Rural primary schools' responsiveness to the psychosocial needs of OVC

This study revealed that OVC face various psychosocial challenges, namely stigmatisation, isolation, low self-esteem, bullying and lack of concentration. Challenges which hamper schools from responding to the psychosocial needs of in-school OVC were identified as lack of specialist school-counsellors, lack of staff-development workshops on OVC-related issues

and poor conditions of service for teachers. The following section focuses on the psychosocial problems confronted by OVC and how schools respond to them.

5.4.2.1 Lack of specialist school counsellors and the welfare of in-school OVC

The current study revealed that OVC were discriminated against by other learners for lack of material things like uniforms and stationery. The study also established that rural primary schools lacked specialist counsellors to deal with psychological challenges confronting OVC. Interviews with principals and school counsellors indicated that all the sampled school counsellors were not specialists; hence, it is highly possible that the services they rendered to OVC were substandard. The findings of the current study concur with Atwine et al.'s (2005) study in Uganda which established that orphans in rural communities faced high levels of psychological distress. OVC may be stressed by challenges which include parental loss, discrimination by the community and limited educational opportunities. Similarly, Mushunje and Mafico (2007:15) revealed that OVC suffer from emotional stress due to a number of factors which include watching parents dying. Such challenges, if not addressed, may negatively affect the well-being of in-school OVC.

All six counsellors indicated that they could not get adequate time to assist OVC effectively because of a number of factors which include lack of time due to heavy workload. This observation, compounded by the poor conditions of service for teachers in Zimbabwe, was found to compromise the work of school counsellors. In the same vein, Asikhia and Mohangi's (2015) study in South Africa revealed that OVC encounter a high prevalence of psychological emotional problems due to lack of support by teachers and the school environment. Furthermore, a study carried out in Zimbabwe by Shumba and Moyo (2014:145) established that OVC were not getting adequate counselling due to the negative attitudes of teachers towards counselling. Results from FGDs held with learners in the three primary schools also indicated that some learners were not familiar with their school counsellors suggesting that counsellors rarely met learners to find out the challenges they faced in order to assist them.

The current study also revealed that OVC face the problem of bullying from other learners. Interviews with school counsellors indicated that most cases of bullying they handle in their respective schools involve OVC. This relates to Martinet al.'s (2011:85) observation that children who lack parental guidance and discipline develop anti-social behaviour. All six counsellors concurred that the experiences of OVC if not given sufficient guidance can lead to the development of negative self-concepts. In addition, Gumede's (2009:27) study in

Zimbabwe indicated that some children assumed adult responsibilities; for example, caring for ill or elderly parents (role reversal) due to the impact of HIV/AIDS. Observations by the researcher during data collection at one of the schools revealed that some girl learners were dismissed from school earlier than others. When the researcher probed school authorities on the matter, it emerged that these girl learners were requested by their guardians to come home earlier to care for some family members. The above scenario denies children their rights as enshrined in the UNCRC (1989:4) and calls for institutions like schools to respond to the plight of these children. Thus, Ganga and Maphalala (2014:449) highlight that OVC view teachers and peers as shoulders on which they can cry on. In the same vein, Ongevalle et al.(2008:4) suggest that teachers should have the capacity and commitment to address the needs of OVC. However, judged against what the researcher found in schools as noted above, it can be concluded that Zimbabwean rural primary schools are not providing OVC with adequate psychosocial service due to factors such as lack of specialist counsellors.

The current study also revealed that OVC were discriminated against because of lack of school uniform and stationery. Such deprivations were also reported by all principals and school counsellors interviewed to be associated with bullying of OVC by other learners and vice versa. In view of an array of psychosocial challenges confronting OVC highlighted above, it is imperative that schools should have specialist school counsellors to assist these learners adequately. Interviews with principals and school counsellors, as well as FGDs with OVC in the three schools indicated that OVC confront psychosocial challenges such as isolation, aggression, child abuse and lack of concentration in class. It also emerged that schools were struggling to respond to the psychosocial needs of OVC due to factors such as lack of training workshops and refresher courses for school counsellors aimed at equipping them with skills on how to handle and deal with OVC and teacher demotivation. This study revealed that all the school counsellors interviewed were not specialists; hence, they needed some training in guidance and counselling even if it was short-term. This implies that the counselling provided by teachers who volunteered to be school counsellors was not adequate to address the psychological challenges confronting in-school OVC. The findings of the current study corroborate earlier studies, which indicated that OVC experience depression, behavioural problems as well as discrimination and stigmatisation (German, 2005:83; Muronda, 2009:60; Seruwagi, 2012:164). These psychosocial problems have been shown to impact negatively on the self-concept of OVC (Giddens 2009:520). In the same vein, Jackson (2002:274) states that stigma associated with OVC arise when learners are discriminated against at school or in the

community. Thus schools and school counsellors in particular should attempt to create friendly school environments to minimise stigmatisation and discrimination of learners.

5.4.2.2 Work load and the efficacy of school counsellors

The study established that school counsellors' capacity to attend to the psychosocial needs of in-school OVC was compromised by the heavy teaching loads assigned to them by school principals. Principals and school counsellors concurred that guidance and counselling is allocated to school counsellors as an extra load to the examinable subjects. Because of the wide primary school curriculum the school counsellors indicated that they rarely get time to provide counselling services to OVC. FGDs with in-school OVC also revealed that learners rarely meet school counsellors because both school counsellors and learners will be engaged in other teaching-learning programmes. This may imply that appointment of school counsellors is done just to comply with the Ministry of Primary and Secondary Education regulations when in practice schools pay a lip service to guidance and counselling programme.

The finding of this study relating to heavy work load impeding the efficacy of school counsellors corroborates Mapfumo and Nkomo's (2013:107) observation that heavy workload impedes the effective implementation of guidance and counselling. Wood and Goba (2011:282) also revealed that teachers raised working long hours as well as attending to their lessons and assessment as impeding their ability to attend to OVC. Similarly, Mghweno et al.'s (2014:13) study revealed that teacher counsellors teach normal load of examinable subjects per week in addition, to counselling duties and other responsibilities assigned by principals. In addition, Nyamwange et al. (2012:11) observed that heavy workloads militate against smooth running and implementation of guidance and counselling programme in schools. The researcher contends that heavy workload compounded by lack of training of counsellors, resources and negative attitudes of teachers towards guidance and counselling is likely to negatively affect the schools' ability to address the psychosocial needs of OVC although school counselling is viewed as a vital and integral part of the education system (Paley, 2001:15). Naidoo (2010:66) also acknowledges that schools have an important role to play in the intellectual and emotional development of a child.

Research has also shown that teachers view guidance and counselling as extra work that should be paid (Achebe, 1986:10; Kurebwa et al.,2014:65). With such an attitude, even if school counsellors were not overloaded, they were likely not to attend to challenges confronting OVC. Participants suggested ways of improving the efficacy of school counsellors which included

appointment of full-time school counsellors and reduction of the workload of teacher counsellors so that they could focus on provision of care and support. Deployment of social workers at each school was also suggested as an intervention that could improve the well-being of in-school OVC, as OVC could be referred for further support.

5.4.2.3 Lack of resources and support

Data obtained from interviews with school counsellors revealed that teachers were handicapped in assisting in-school OVC because they were not supported by the school administration and the Ministry of Primary and Secondary Education. All six school counsellors bemoaned the lack of school-based policies meant to assist OVC. They indicated that some teachers who were assisting OVC materially and emotionally, did so on their own and not guided by policy. The principals interviewed also confirmed the sentiments expressed by counsellors in respect of lack of school-based-policies aimed at assisting OVC. Two school counsellors at School B blamed the school administration for diverting funds raised through a poultry project meant to assist OVC to other areas like sports. They indicated that teachers who were involved in the project were contemplating pulling out of it because of the way funds generated were used.

The study also revealed that the Schools Psychological Services, a subdivision of the Ministry of Primary and Secondary Education responsible for handling learners with special needs, rarely visit schools to coach teachers on how to handle children with psychosocial problems. It emerged through document analysis that schools kept records of learners they referred to the School Psychosocial Services. However, it was gleaned from the same document analysis that the Schools Psychological Services personnel rarely came to schools to address problems referred to them. This forced teachers, particularly school counsellors to handle learner problems with the limited knowledge they had. It also emerged from the study that all three principals had never attended any workshop on handling OVC. This implies that such principals could not come up with school-based policies aimed at assisting OVC. In the light of this observation, I contend that both teachers and principals should be trained in issues relating to OVC if schools are to respond effectively to their needs. The finding of this study relating to lack of knowledge of school administrators in OVC-related issues is consistent with findings of earlier studies by Wood and Goba (2011), Runhare (2010), and Naidoo (2010), which revealed that most principals and governing bodies lacked knowledge and skills to plan programmes responsive to the needs of learners. Similarly, Mwoma and Pillay's (2016:88) research indicated that teachers lack knowledge related to life skills which compromised their

ability to care and support OVC. A school is largely viewed as a well-placed institution to respond to the needs of disadvantaged learners such as OVC (Byenkaya et al., 2008:34, Smart, et al., 2003:5). In the same vein, Chamba (2011:19) states that primary schools have two crucial tasks, namely to facilitate care and support of OVC and create child-friendly environment for all children. Evaluated against society's expectations of schools with regard to handling OVC, it can be deduced that Zimbabwean rural primary schools fall short of societal expectations. Thus, Smart *et al.*, (2003:5) suggested that schools as rights-based organisations should adopt programmes that are responsive to the needs of OVC such as the ones listed below;

- Delivering daily meals;
- Provide after-school supervision;
- Link children in difficult situations to other service providers;
- Enroll and retain OVC in school;
- Finding out about other organisations in the area that help OVC and their families; and
- Invite organisations to deliver talks at school explaining services they offer.

5.4.3 Teacher Competence and Skills to Assist OVC

This section explores teacher competence and skills in dealing with in-school OVC. Empirical data collected around this theme generated three sub-themes that will receive attention in this section namely teachers and administrators training, teachers' conditions of service and implementation of guidance and counselling.

5.4.3.1 Teachers and principals 'knowledge in OVC care and support.

This study established that both principals and school counsellors did not receive training in counselling which made it difficult for schools to run effective guidance and counselling programmes. It emerged that school counsellors and principals either had general diplomas or degrees with no specialisation in counselling, a component which is vital for provision of quality psychosocial services. Principals indicated that there were no teachers who specialised in counselling, because of that most teachers were not confident to assist OVC. This created a problem to the few teachers who volunteered as school counsellors since most teachers would refer learners with problems to these teachers.

The principals indicated that the situation of OVC care and support in schools was exacerbated by the non-functionality of the School Psychosocial Services department and dearth of

workshops on OVC care and support. It emerged that the School Psychosocial department was not visiting schools regularly to attend to students with special needs. Training is crucial in any area and with regard to guidance and counselling; UNESCO (2001) indicates that teachers need to be equipped with professional skills that are critical for the designing of comprehensive guidance and counselling programmes, provision of services and use of evaluation procedures that create a positive future for the learner. In the same vein, Gysber and Henderson (2001:248) state that if teachers who provide guidance and counselling services are not buoyant enough to teach the subject then an ideal situation may remain 'Utopian'. Considering the situation of teachers and administrators' training with respect to OVC care and support, Gysber and Henderson's (2001:248) observation becomes relevant. Moreso, UNAIDS Inter-Agency Task Team on Education (2004) suggested that curriculum for OVC care and management should include identification of vulnerable children, support structures for OVC, networking between school and community and child safety and protection against abuse in order to equip teachers adequately.

Several studies conducted in African countries on the implementation of guidance and counselling (Boitt, 2016; Mapfumo & Nkomo, 2013; Mwoma & Pillay, 2016; Nkala, 2014; Shumba, Seotlwe & Montisi, 2012) identified lack of teacher training in OVC care and support as the major challenge to guidance and counselling implementation. This may serve to indicate that OVC care and support is an area that requires training of teachers if schools are to respond to the psychosocial needs of OVC efficiently and effectively. This is in line with Naidoo's (2010:76) observation that in the context of OVC care and support, teachers' colleges should be the first to start training of potential teachers to effectively address the needs of OVC.

Some African countries have since embarked on some initiatives aimed at augmenting teachers' efforts to deal with challenges confronting OVC. For example, Zambia trains volunteers from the community as paraprofessionals to assist teachers in teaching certain key areas of the curriculum, for example, basic literacy, numeracy and life skills (Clarke, 2008:232). In Tanzania, an intervention project called the Humuliza was implemented (Subbaro & Coury, 2004:13). The intervention provided counselling and seminars to equip primary school teachers on the importance of communicating with learners. Some of the key areas of the intervention include sensitisation and empowerment of teachers on identification of problems and needs of learners, the importance of attachment and methods of improving learners' self-esteem (Naidoo, 2010:78; Subbaro, 2004:13). Because of the programme, teachers became sensitive to OVC issues to the extent of conducting home visits to OVC after

school to acquaint themselves with problems encountered by OVC in their homes. It is the researcher's contention that if such an intervention could be adopted in Zimbabwe, rural schools could become more responsive to the needs of OVC. As pointed out by Naidoo (2010:78), educator training programmes can leverage the quality of education and care of OVC.

Zimbabwe has also started training of paraprofessional teachers; However, these teachers augment teachers at Early Childhood Development level (ECD). May be as the number of in-school OVC continue to present challenges to the school counsellors, the programme could be extended to train paraprofessionals to assist in caring and supporting OVC in higher grades. In Zimbabwe at the moment, teachers and principals are guided by the Chief Education Officer Circular Minute Number 51 of 1992 which provides the parameters for running guidance and counselling in schools (Mapfumo & Nkomo, 2013:111). The circular outlines the job description of a school counsellor as follows:

- Helping to set up and in-service guidance and counselling committee that looks after the day-to-day management of guidance and counselling programme in the school;
- Coordinate the creation of guidance and counselling curriculum for school wide implementation including crafting of a timetable for class-based group guidance activities;
- Provide where possible one-on-one counselling for learners and arranging appropriate referrals;
- Helping to mobilise resources for use in guidance and counselling programme;
- Producing periodic reports on the progress of guidance and counselling activities in the school; and
- Collecting and collating relevant learner data.

Interviews with principals and school counsellors revealed that majority of the school counsellors were not aware of Circular Minute 51 of 1992 and only school principal B produced the circular. When the researcher probed the principal on the contents of the circular, it emerged that he was not familiar with the issues in the circular, indicating gaps in knowledge of policies relating to OVC which could be a contributory factor to poor implementation of guidance and counselling programme in schools.

5.4.3.2 Teachers' conditions of service and teacher attitude

This study showed that the ability of rural primary schools to respond to the needs of OVC such as the psychosocial problems was compromised by the poor conditions of service of teachers, which included heavy teaching load, poor remuneration and delays in payment of salaries for civil servants by government. All three principals and six school counsellors interviewed concurred that the workload for primary teachers was too high to allow those who volunteered to be school counsellors to attend to problems encountered by OVC.

They indicated that the situation was exacerbated by delays in the payment of salaries that left teachers demotivated. This observation was confirmed by responses from FGDs held with OVC in the three schools, which indicated that school counsellors seldom attended to OVC citing poor working conditions. Some OVC indicated that they were not familiar with their school counsellors. This may also indicate that principals appoint school counsellors but fail to supervise them to the detriment of the schools' capacity to assist in-school OVC. The finding of this study relating to failure by schools to respond to the needs of OVC such as the psychological needs is inconsistent with Smart et al.(2003:4) who suggested that schools are rights-based organisations and as such should provide psychosocial support to all children. The researcher contends that this could depend on a number of issues such as economic and political stability of a country. In the case of Zimbabwe, both the political and economic environments were at their lowest ebb by the time this study was conducted. This could have contributed significantly to the failure by schools to fulfil their mandate of functioning as rights-based organisations. Perhaps it would be prudent to have efforts made by all stakeholders in education to make schools more responsive to the needs of in-school OVC. For example, the plight of OVC in Zimbabwe worsened when NGOs withdrew their support on programmes such as school feeding schemes on political grounds; a development which could have been averted if the parties involved had prioritised the welfare of OVC. They, Mwamwenda (2004:114) observed that adult support is crucial to the psychosocial well-being of children. By implication, in the school context, teachers and counsellors in particular, should fulfil their parental roles diligently, for example, by connecting OVC with organisations that support such children.

The current study revealed that teachers' morale was very low thereby impacting negatively on the services they offered to OVC. Both principals and school counsellors agreed that although teachers were not trained to handle OVC, with the advent of e-learning they could

read up on the issue and be in a better position to assist OVC. However, they pointed out that the zeal to read for professional improvement among teachers was low because they were demotivated by the poor conditions of service they operated under such as poor salaries, large classes and delays in payment of their salaries by the government. The responses from FGDs held in the three schools with OVC corresponded with the responses from principals and counsellors on this subject. The OVC indicated that most teachers referred them to the school counsellors even over petty issues. They also reported that, at times, teachers neither conducted lessons nor attended to OVC, and grumbled over their conditions of service. Thus, it can be extrapolated that the challenges confronted by OVC are linked to and exacerbated by the economic and political challenges Zimbabwe is going through, which impact negatively on the conditions of service of teachers.

5.4.3.3 Implementation of guidance and counselling

One of the main strategies to address the needs of in-school OVC implemented in Zimbabwe is guidance and counselling programme. Research has shown that schools and teachers are vital to the development of OVC especially in the wake of loss of their parents (Mapfumo & Nkomo, 2013:108; Mwoma & Pillay, 2016:89; Seruwagi, 2012:154). This study, however, established that rural primary schools face challenges to implement guidance and counselling programme which include shortage of teaching resources (text books), infrastructure, qualified counsellors as well as teacher-learner negative attitudes towards guidance and counselling. In all three primary schools sampled, principals, school counsellors and learners indicated that lack of teaching-learning resources was a big challenge. School counsellors and learners indicated that there was lack of facilities and financial support from school administration. It also emerged from the participants and documents analysis that guidance and counselling was not allocated adequate time on the timetable and other school programmes such as co-curricular activities. Curricular resources such as textbooks and syllabi were lacking in the sampled schools and school counsellors viewed lack of support from school administration as retrogressive. The finding of this study with regard to lack of guidance and counselling curriculum resources and lack of administration support affirm findings of earlier studies (Kamore & Tiego, 2013:796; Majoko, 2013:45; Mapfumo & Nkoma, 2013:109) which also indicated lack of school administration support as a challenge to implementation of guidance and counselling.

This study also established that the sampled schools lacked infrastructure to designate some rooms as specialist rooms for counselling. The study further revealed that there were no

guidance and counselling committees, clear guidance and counselling mission statements or mandatory school policies to guide teachers in implementing guidance and counselling programmes. This finding corroborates the findings of Nyarangi (2011) and Majoko (2013) which also revealed that schools encounter challenges such as lack of clear policies on the implementation of guidance and counselling.

Negative teacher and learner attitudes towards guidance and counselling were also found to hinder smooth implementation of the programme. It also emerged from the participants that teachers were inadequately trained which compromised their efficacy in the provision of psychosocial services to OVC. Against the backdrop of a litany of challenges noted by participants as militating against effective implementation of guidance and counselling and hence empowering schools to respond to the psychosocial needs of in-school OVC, I argue that there is a need for school administration to be trained on the value of the programme in schools so that they support the programme in terms of infrastructure, finance, time and curricular resources.

5.4.4 Structures and Programmes in Rural Primary Schools Aimed at Addressing the Needs of OVC

The aim of this study was to establish the responsiveness of rural primary schools to the needs of OVC. One of the themes which emerged from this study was availability of structures and programmes in schools aimed to address the needs of OVC. Four sub-themes emerged from the participants' responses, namely, inadequacy of BEAM, inadequate school feeding scheme, no viable counselling programmes and the absence of viable fundraising projects. The discussion on the theme relating to availability of structures and programmes aimed to assist OVC will be guided by the above sub-schemes.

5.4.4.1 The BEAM

Data collected through interviews, FGDs and document analysis revealed that BEAM is the major government-sponsored programme being implemented in all three sampled schools. All the participants concurred that BEAM assisted OVC with payment of school fees. It also emerged from the study that all the participants had reservations about BEAM. The issue raised by the participants was that the effectiveness of the intervention in assisting the targeted group was compromised by the partiality of BEAM selection committee and late disbursement of BEAM funds by the government. The study also revealed that BEAM does not cover

examination fees, uniforms and stationery which leaves parents of BEAM beneficiaries with a heavy burden. The findings of the study relating to BEAM resonate with Garutsa's (2012:15) observation that there is no proper policy guiding implementation of BEAM. In the same vein, Maushe (2014:14) indicated that parents of BEAM beneficiaries raised a large proportion of money to pay for non-school fee costs such as stationery and uniforms. This, together with the economic challenges that the country is experiencing, has led to a significant number of OVC dropping out of school. This may mean that the government should revise the policy guiding the implementation of BEAM so that it could cover non-fee related expenses for BEAM beneficiaries.

5.4.4.2 The school feeding scheme

Data from interviews, FGDs and document analysis indicated that the school feeding programme ceased in 2013 when the GNU ended. Both principals and school counsellors were disheartened by the stoppage of the scheme which they regarded as helpful to OVC. It emerged that school feeding schemes were effective during the GNU and were sponsored by NGOs which withdrew when GNU came to an end. Document analysis supported the views from the participants relating to the period when feeding schemes in schools were viable. Interviews with principals and observations by the researcher showed that a small-scale school feeding scheme was being implemented in rural primary schools. School records and observations indicated that each primary school received eight bags of maize meal per month towards the scheme. It emerged that the government through the Department of Social Welfare sponsored the school feeding scheme. All the participants, however, indicated that the envisaged feeding scheme was not comprehensive and it would not make meaningful impact since it targeted pre-school and infant classes only. The participants expressed fears that due to drought and economic hardships that were prevailing at the time of the study, many learners would drop out. Research has shown that failure to provide children especially OVC with needs such as food impacts negatively on their well-being (Ganga & Chinyoka, 2010:8; UNICEF, 2009:8).

Feeding schemes are vital in schools as principals and school counsellors agreed that they improve school attendance, concentration and participation of learners. This also relates to Maslow's hierarchy of needs theory which states that physiological needs are basic and must be satisfied before higher needs are fulfilled (Berg & Theron, 2009:132; Feldman, 2009:319). Against the backdrop of a lack of school-based projects to assist OVC, the researcher proposes that community programmes targeting OVC such as Zunde raMambo be resuscitated so that

institutions that deal with OVC can be supported. This is in line with Munyati et al.'s (2006) recommendation that schools should form partnerships with the community and intervention agencies as a way of capacitating them to handle problems confronting OVC effectively.

5.4.4.3 Guidance and counselling school curriculum

The study revealed that guidance and counselling was part of the school curriculum in all three schools. The principals and counsellors interviewed concurred that the subject was offered and this was consistent with data obtained through document analysis of timetables and scheme books of the sampled schools. However, the responses from learners during FGDs were inconsistent with the responses from principals and counsellors, as well as document analysis. Learners expressed concern that teachers rarely taught guidance and counselling; instead they devoted time for guidance and counselling to examinable subjects like Mathematics and English. This disinterest regarding the implementation of guidance and counselling may indicate that the subject is not systematically implemented in schools.

The findings of this study relating to unsystematic implementation of guidance and counselling curriculum confirms Shumba and Moyo's (2014:145) observation that teachers have a negative attitude towards counselling. The challenges confronting OVC entail the need for sincere implementation of guidance and counselling. Earlier studies (Chase et al., 2004:6; Germann, 2005:71; Muronda, 2009:64) indicated that OVC were stigmatised, discriminated against, mocked and taunted. Such experiences warrant implementation of a robust counselling programme to restore the dignity and self-esteem of these vulnerable children.

The findings of the study also indicated that there were no peer counsellors in all three sampled schools. All the participants in this study concurred that there were no peer counsellors and expressed ignorance about this intervention. This observation is inconsistent with Edwards and Sweeney's (2007) finding of a study carried out in the United States of America, which revealed that OVC were attached to classmates who served as peer counsellors. It also indicated that above a peer counsellor was a teacher who served as a mentor for the peer counsellor. It emerged that the system helped OVC to fit well into the school system as they were assisted significantly. Involvement of peer counsellors is crucial in that OVC are more likely to open up to peers than to adults, and when this occurs appropriate steps can be taken to address issues affecting them. The inconsistency of the findings of the current study with those of the study by Edwards and Sweeney (2007) could be due to the different levels of development of the two countries in terms of strategies adopted to deal with the OVC phenomenon. Developed

countries such as the United States of America appear to be ahead on social and economic provisions to OVC compared to developing countries like Zimbabwe. The researcher submits that if Zimbabwean schools adopted peer-counselling strategy, they could be more responsive to the needs of OVC.

Several studies have indicated that schools are crucial in caring for and supporting OVC (Byenkya et al., 2008; Campbell, et al., 2014; Lewthwaite, 2011; Pufall, et al., 2014). Peer-counselling is one of the strategies suggested by the participants that rural schools could implement in order to address the psychological needs of in-school OVC. The school and the family constitute the microsystem level of Bronfenbrenner's ecological model (Bronfenbrenner, 1979:40). It is the immediate environment of the child. To Bronfenbrenner (1979:42), if the microsystem of the child is affected by mishaps such as the death of one or both parents, the child's social development is affected negatively. This could explain some disciplinary problems caused by in-school OVC as highlighted by school counsellors. Against this backdrop the school as an immediate environment (microsystem) should create a conducive environment for the development of the child including OVC.

5.4.4.4 Fundraising projects

The study revealed that one out of three schools studied was running a poultry project sponsored by a non-governmental organisation called CBAP. Interviews held with the principal and school counsellors of school B where this project was run, revealed that three teachers and all learners in the junior classes were involved in this project, and this was also confirmed by OVC during the focus group discussion. Document analysis on the productivity of the project indicated that the project was at an infant stage, realising a small margin profit. Records also indicated that only two OVC were catered for by the project by way of payment of fees. All the participants at this school agreed that the project needed to be expanded to cater for more OVC. Interviews with the principal, school counsellors and FGDs with OVC at school A and school C indicated that there were no fundraising projects to assist OVC at these schools. SP-A reported that there was a club selling sweets to fund-raise towards the purchase of stationery for some OVC; however, this claim could not be substantiated by school counsellors and learners. When the researcher requested documents relating to the activities of the club, they could not be provided which confirmed that such a project was probably non-existent. All the participants at School C concurred that there was no school-based project to assist OVC. The principal indicated that lack of capital was a stumbling block to the implementation of

fundraising projects. This was also raised by school counsellors at School A. School counsellors interviewed suggested possible fundraising projects such as soap-making, poultry, tuck shops, and grinding mills which they thought could impact positively on the lives of in-school OVC if implemented. However, they indicated that lack of funds hampered their project ideas.

Based on information obtained from participants relating to lack of viable fundraising projects in the participating schools, it could be inferred that a large number of in-school OVC would drop out. This is in line with Robertson's (2011:6) observation that 88% of people in Zimbabwe live in rural areas where service provision and resources lag behind the urban areas. In this context, children from poor backgrounds such as OVC are likely to be negatively affected by a lack of school-based fundraising projects. In addition, Kornblum and Smith (2008:275) also observed that children from poor families are likely to drop out of school. To address this, it is crucial that schools initiate projects intended to support and retain OVC in school, because as Campbell et al.(2014:621) state, schools are well placed to respond to the challenges confronting OVC.

5.5 CHAPTER SUMMARY

This chapter presented, analysed and discussed data in line with the research questions. Data were collected from three categories of respondents, namely principals, school counsellors and OVC. Empirical data analysed generated themes which formed the bedrock of analysis and discussion. Some of the themes that guided analysis and discussion of findings include the following: rural primary schools' responsiveness to the material needs of OVC; rural primary schools' responsiveness to the psychological needs of OVC; and teachers' training in handling OVC. The study found that rural primary schools are ill-equipped in many respects to respond to the multifarious challenges confronted by in-school OVC. Strategies suggested by the participants to improve the preparedness of primary schools to respond to the needs of OVC adequately were identified as: allocation of full-time specialist counsellors in schools; conducting workshops for principals and teachers on handling OVC; and formation of partnerships between the school and the community, as well as with the donor community on OVC-related issues. The next chapter provides the summary, conclusions and recommendations of the study.

CHAPTER 6

SUMMARY, CONCLUSIONS AND RECOMMENDATIONS

6.1 INTRODUCTION

The aim of this study was to explore the responsiveness of rural primary schools to the needs of in-school OVC. In Chapter 5, data were presented, analysed and discussed following themes generated from the research sub-questions. In this last chapter, a summary of the findings, conclusions and recommendations of the study are presented according to the sub-questions that guided the study. Suggestions for further study and contributions of the research to scholarship are also covered. A model to improve the welfare of in-school OVC is suggested as part of the recommendations of the study.

6.2 SUMMARY OF THE STUDY

This study was carried out to determine the responsiveness of rural primary schools in Zimbabwe to the needs of OVC. The research was motivated by research carried out in Zimbabwe and elsewhere which indicated that in-school OVC encounter a myriad of problems like lack of food, clothes and stationery (Datta, 2009:3; Germann, 2005:71; Martin, et al., 2011:85). The current study thus, sought to establish whether in-school OVC in rural primary schools in the Masvingo district confronted similar challenges, and if so, how the schools dealt with the challenges. The main research question undergirding this study was framed as follows: to what extent are rural primary schools in Zimbabwe responsive to the needs of OVC? To unpack the research problem, literature review, data collection, presentation and discussion of empirical data revolved around the sub-questions stated below:

- Are rural primary schools equipped to address the material needs of in-school OVC?
- How prepared are rural primary schools to deal with the psychological problems confronted by in-school OVC?
- To what extent are teachers competent in dealing with OVC?
- Are there structures in rural primary schools aimed at addressing the needs of OVC?
- How can rural primary schools be empowered to meet the needs of OVC?

The following section focuses on summary of the literature review.

6.3 SUMMARY OF LITERATURE REVIEW

This section presents a summary of literature reviewed in line with research sub-questions.

6.3.1 Schools and the Provision of Material Needs

Research has shown that one of the challenges confronted by OVC is lack of material resources (Germann, 2005:70; Munyati, et al., 2006:12; Muronda, 2009:43), and basic necessities, such as clothing, food and shelter (Jackson, 2002:275). Due to lack of food, OVC are prone to malnutrition (Germann, 2005:71; Van Breda, 2010:65). Research conducted in Zimbabwe revealed that OVC encounter material difficulties, which include access to food, school fees, toiletries, blankets, clothes and shoes (Nyamukapa et al., 2010:988; Chase et al., 2006:7). With respect to education, literature has shown that basic human rights of OVC were violated as many dropped out of school due to lack of school fees, uniforms and stationery (Martin, et al., 2011:20; Datta, 2009: 3). This study was conducted in rural areas where resources are scarce compared to the urban areas (Gosh & Kalipeni, 2004:11; Martin et al., 2011:17). Logically, in-school OVC in rural schools are more vulnerable than OVC in urban areas.

In view of the material challenges confronting OVC, it is imperative that schools intervene in caring for and supporting in-school OVC. In this regard, research in Zimbabwe revealed that schools are ill-equipped to support OVC materially (Campbell, et al., 2014: 516; Nyamukapa, et al., 2010: 988). This finding is, however, contrary to the assumption that schools serve as protective shields that help children to withstand problems they encounter (Byenkya, et al., 2008: 33; Ansell, 2008: 809). Martin et al. (2011:15), and Wood and Goba (2011:10) are of the collective view that schools create supportive environments for OVC and help them to learn social skills. However, on their own, schools have been found unable to care for and support in-school OVC (Campbell, et al., 2014:520). Some studies have highlighted the importance of involving all the components of society like the family and school, which represent the microsystem, macrosystem, exosystem and mesosystem in caring for and supporting in-school OVC (Chinyoka, 2013: 91; Seruwagi, 2012:68). Some scholars have observed that with adequate support from different stakeholders, schools can engage in school-based programmes that help to ameliorate material challenges confronting in-school OVC such as school feeding schemes and nutrition gardens among others (Tsheko, 2007:79; Martin, et al., 2011:19; Naidoo, 2010:10). In this section, literature has shown the challenges schools face to address the material needs of in-school OVC. The next section covers literature that indicates the responsiveness of schools to the psychological needs of OVC.

6.3.2 Primary Schools' Preparedness to provide Psychosocial Support to OVC

International and Zimbabwean literature has shown that in addition to food, shelter, and other physical facilities, OVC experience psychosocial challenges (Chitiyo, et al., 2008: 14; Sengendo & Nambi, 1997:10;). It has been highlighted that OVC encounter psychosocial challenges such as grief, loss of identity, stigma and rejection (Germann, 2005:351; Muronda, 2009: 56). Some of the problems faced by OVC emanate from the death of parents, which normally culminates in children experiencing depression, behavioural problems as well as low self-esteem (Francis-Chizororo, 2008: 113; Seruwagi, 2012: 65). As a result of these daunting challenges, girl OVC are often forced to enter into sexual relationships with older men in order to be cushioned from the impact of poverty (Lacour & Tissington, 2011:525; Salaam, 2004:10). As part of the microsystem (Bronfenbrenner, 1979:40), the school should step in to care for and support OVC. As specialised institutions, schools are expected by society to address the psychosocial needs of OVC adequately. However, research has revealed that schools are ill-equipped to respond to the psychosocial needs of in-school OVC due to factors such as lack of specialist school counsellors, lack of knowledge and skills to deal with OVC by both school administrators and teachers (Mwoma & Pillay, 2016; Shumba & Moyo, 2015:145).

6.3.3 Teacher Competence in Dealing with OVC

Teacher training in handling OVC is critical in the provision of care and support to in-school OVC. Research in sub-Saharan Africa and Zimbabwe has revealed that teachers are ill-equipped to assist OVC (Datta, 2009:5; Naidoo, 2010:185; Shumba & Moyo, 2015:145; Wood & Goba, 2011:286). The role of schools in assisting OVC was aptly captured by Ansell (2008: 811), who suggested that in situations where adults fail to play their role of caring for and supporting children, schools should step in. Research suggests a number of programmes that schools can embark on to empower themselves to deal with OVC, for instance, workshops, setting up peer counsellors and CCT (Fanelli, 2007:8; Nyamukapa et al., 2010:988; Pufall, 2014: 380). When teachers are adequately trained, they can implement school-based programmes aimed at assisting OVC, which include counselling and supporting child-friendly activities to mention just but a few (Martin, et al., 2011: 16; Shumba & Moyo 2015:14; Tsheko, 2007:79). Research in Zimbabwe has shown that teachers are not well-equipped to assist in-school OVC (Chamba, 2010:6; Shumba & Moyo, 2015:13), a scenario which begs for swift action by the government to address this anomaly.

6.4 STRUCTURES FOR ASSISTING OVC IN RURAL PRIMARY SCHOOLS

Research in Zimbabwe has shown that BEAM is a major intervention to assist in-school OVC (Masuka et al., 2012:3; Maushe, 2014:13), and that its efficacy to cater for educational provisions of OVC is lacking in a number of areas (Garutsa, 2012:55; Munyati, et al., 2006:45). It has been found that BEAM funds are normally disbursed to schools late by the government, thereby disadvantaging the beneficiaries, and depriving them of educational provisions (Muronda, 2009:68; Maushe, 2014:14). Another limitation of BEAM, which was found to militate against in-school OVC to learn easily, is its failure to cover costs of non-fee materials such as uniforms and stationery (Masuka et al., 2012:6; Maushe, 2015:13).

Literature has shown that many children in Zimbabwe have been made vulnerable by factors such as drought, HIV/AIDS and economic challenges (Asante, 2012:2; Nyamukapa et al., 2010:975). To alleviate food insecurity for OVC, the Government of Zimbabwe has embarked on a school feeding programme that caters for ECD and pre-school learners (MLSS, 2011:7). It is common knowledge in Zimbabwe that the school feeding programme sponsored by the government is not comprehensive since it leaves out a large number of needy children. This observation affirms the findings of Campbell et al. (2014:455) that OVC receive limited support in school. School feeding programmes alleviate hunger among learners and increase their attention and concentration (UNICEF, 2009:16); hence, it is critical that the government and other stakeholders should support such schemes.

International and Zimbabwe literature has shown that school counsellors or qualified social workers are invaluable in caring for and supporting in-school OVC (Mwoma & Pillay, 2016:90; Shumba & Moyo, 2015:14). However, research has revealed that schools lack qualified counsellors, and therefore, they are untrained to deal with psychosocial challenges confronting OVC (Campbell, et al., 2014: 415; Naidoo, 2010:85; Nyamukapa *et al.*, 2010: 993). In respect of the role of schools in caring for OVC, Chamba (2010:19) identified two key tasks schools must fulfil, namely, facilitating care and support for teachers and provision of child-friendly environment. To fulfil these tasks, research has recommended that teachers be trained in handling OVC (Fanelli, 2007:8; Pufall, 2014:380).

6.5 POSSIBLE STRATEGIES FOR EMPOWERING SCHOOLS TO SUPPORT OVC

The possible strategies to empower schools to care for and support OVC presented in this section emanated from participants as well as literature reviewed. The strategies suggested include:

- Training of teachers and school administrators in dealing with OVC;
- Deployment of at least one specialist school counsellor to each primary school;
- School-community partnerships in projects that assist OVC such as the Zunde Ra Mambo and nutrition gardens;
- Partnership between NGOs and government in sponsoring school feeding schemes;
- Formation of peer-counselling clubs at school; and
- Training teachers and administrators on OVC care and support.

The possible strategies to empower rural primary schools in handling and dealing with OVC mentioned above fit in the first three levels of Bronfenbrenner's (1979) ecological system model, namely the microsystem, mesosystem and exosystem. As highlighted in section 3.8.1, the microsystem refers to the innermost layer of the model and comprises the family and the school (Bronfenbrenner, 1979:40). To Bronfenbrenner (1979:41), the microsystem as the immediate environment of the child should provide a conducive environment for the development of a child. In the context of this research the school as a critical component of the microsystem can create a responsive environment to the needs of in-school OVC through adopting strategies such as formation of peer-counselling clubs, recruiting specialist school-counsellors and conducting workshops to equip teachers and administrators with knowledge and skills to handle and deal with OVC.

The mesosystem of Bronfenbrenner's ecological model emphasises on linkages and interrelationships among components of the microsystem such as the home and the school (Bronfenbrenner, 1994:39). Strong links between elements of the child's microsystem facilitate the fulfillment of the needs of a child (Lewthwaite, 2011:19). Thus, in the context of Bronfenbrenner's ecological model, the school-community partnerships suggested by the participants as a way of empowering schools to support OVC can improve the welfare of in-school OVC significantly. Partnerships between different institutions such as government and NGOs are also emphasised in the mesosystem to improve the fulfillment of the needs of the child including in-school OVC.

6.6 SUMMARY OF THE RESEARCH METHODOLOGY

This study adopted qualitative research designs, namely phenomenology and case study. Phenomenological design was adopted in selecting 15 OVC who participated in this study. As Merilyn and Goes (2011:12) put it, “phenomenological research attempts to understand human behaviour or experiences through the eyes of the actors”. In this sense, the researcher deemed this design appropriate to explicate the experiences of in-school OVC. On the other hand, a case study research design was adopted where three principals and six school counsellors were selected to participate. Yin (2009:18) posits that a case study design focuses on a small geographical area or number of subjects of interest that are examined in detail. Similarly, Zaidah (2009:42) supports the use of a case study design because it produces detailed qualitative accounts that enable researchers to understand the complexities of real-life situations from the perspective of actors. It is against this backdrop that the researcher also considered the case study research design appropriate to explore the well-being of in-school OVC. In this study, data collection instruments were triangulated where the researcher employed in-depth interviews, FGDs, observation and document analysis in order to obtain valid data. The following section focuses on summary of findings of the study.

6.7 SUMMARY OF FINDINGS

This section summarises the findings of the study, which are presented according to the research questions.

6.7.1 Rural Primary Schools and Provision of Material Needs to OVC

One of the challenges that confront OVC is lack of material provisions such as food. This section summarises the findings from the empirical data on the ability of schools to address the material needs of in-school OVC.

6.7.1.1 Food and nutrition

It emerged from the findings of this study that food insecurity for OVC has been exacerbated by the El-Nino-induced drought, which has affected most countries in Southern Africa. Political instability, economic challenges and sanctions imposed on Zimbabwe by the Western countries were some of the factors highlighted by participants to have taken their toll on OVC. The participants revealed that because of drought, most families were vulnerable. The study also established that schools were unable to provide material support to OVC for a number of

reasons, chief among them being financial constraints since school fees and levies charged were too low to sustain school feeding programmes and to supply OVC with stationery. It also emerged that the school feeding programme implemented in schools was scaled down just to cover early childhood and infant classes. The feeding scheme sponsored by the government was scaled down due to economic challenges the government grapples with. In all three sampled schools, the study established that there were no nutritional gardens to support the school feeding scheme. Lack of viable feeding schemes in sampled schools contradicts Maslow's needs theory which emphasises on fulfillment of physiological needs (Berg & Theron, 2009:132). Against this backdrop, the capacity of Zimbabwean rural schools to provide material support was deemed to be inadequate.

6.7.1.2 Provision of stationery

The study established that schools were not providing OVC learners with stationery. Provision of stationery was found to be the sole responsibility of parents and guardians. This study found out that schools failed to provide OVC with stationery because of financial constraints. The school principals indicated that the fees charged were too little to cover stationery expenses; instead the school fees were used to purchase textbooks and other teaching and learning materials. It emerged from this study that failure to provide stationery to learners took its toll on OVC since they lacked the cognitive skills required for the level like writing, and they were, at times, chased out of the classroom by teachers for lack of stationery. It was also established that the plight of OVC with respect to stationery was exacerbated by non-coverage of stationery by BEAM, as some of the OVC it sponsored could not write exercises and tests because of lack of stationery. In view of these challenges, the study concluded that failure by schools to provide stationery compromised the quality of education received by OVC. It also emerged from the study that lack of stationery created disciplinary problems for OVC since they were tempted to steal items like pens, pencils and exercise books from fellow learners. School counsellors also indicated that lack of stationery resulted in erratic attendance of OVC and dropout. In view of the aforementioned problems, it can be concluded that failure by schools to provide stationery to OVC impacts negatively on their education.

6.7.1.3 Payment of school fees

The study established that one out of three sampled schools was sponsoring school fees for two OVC. It emerged that the school got capital to start a poultry project from a non-governmental organisation. The proceeds from this project were used to sponsor school fees for some OVC.

This study found out that the other two schools were not assisting OVC with the payment of fees citing financial constraints. The study, however, established that even in one school where some efforts to raise funds for OVC were made, the intervention was not deemed efficacious since it only catered for an insignificant number of in-school OVC. It was also suggested that if more NGOs could support schools to initiate projects, the educational opportunities for these children could be improved. The study also established that a sizeable number of OVC in the sampled schools were under BEAM, a government scheme that was set up to support OVC through payment of school fees.

It also emerged from the study that BEAM was fraught with problems which included late disbursement of funds to schools, non-coverage of learning materials like stationery and bias in the selection of BEAM beneficiaries. Moreover, the study revealed that there were no fee waiver policies in the sampled schools implying that OVC were not treated preferentially in respect of fees payment. The problems associated with BEAM were found to impact negatively on the education of OVC.

6.7.1.4 Provision of school uniforms

The current study established that provision of school uniforms was the responsibility of parents or guardians. All the participants agreed that parents or guardians were expected to provide complete school uniforms for their children. It emerged from the study that although a high number of in-school OVC had no school uniforms, the schools were not making efforts to assist in this regard. When the researcher asked the school principals about the steps the schools took to address the uniform needs of OVC, they indicated that they could not afford them. The study also found that lack of school uniforms among OVC made them susceptible to stigmatisation and discrimination from fellow learners and teachers. In essence, stigmatisation and discrimination impact negatively on the development of a self-concept of learners.

It also emerged from this study that some school principals were considerate and bent the rules on uniforms to allow OVC to come to school without it. Lack of uniforms was mentioned as one of the factors causing erratic attendance and dropout of OVC. The study also found that some schools that were assisting OVC with uniforms and other materials in partnership with NGOs. Thus, participants suggested that more NGOs should be engaged to partner with schools for the benefit of OVC.

6.8 RURAL PRIMARY SCHOOLS AND PROVISION OF PSYCHOSOCIAL NEEDS OF OVC

Psychosocial needs of OVC are a crucial area that needs to be addressed for in-school OVC to realise their academic potential. The following section dwells on the challenges that compromise the schools' ability to respond to the psychosocial needs of OVC.

6.8.1 Lack of Specialist School Counsellors

This study revealed that OVC confront a myriad of psychosocial challenges, which include stigmatisation, discrimination, bullying and isolation. It emerged that one of the challenges that militate against schools to respond to the psychosocial needs of OVC adequately, is lack of specialist school counsellors. The study revealed that all six school counsellors in the three sampled schools were not trained for the job. Interviews with school principals, school counsellors and document analysis of teachers' qualifications revealed that the counsellors were holders of general diplomas and degrees in education with no specialisation in counselling. This study indicated that lack of specialist counsellors compromised the quality of psychosocial services provided to OVC by schools. The efficacy of the untrained counsellors was reported to be compromised by the dearth of workshops on counselling as well as the heavy teaching loads they are allocated. To address this, all the participants concurred that there is need for the Ministry of Primary and Secondary Education to allocate a full-time specialist school counsellor at each school.

6.8.2 Teachers' Conditions of Service

The study established that provision of psychosocial support to OVC by school counsellors was dented by the poor conditions under which teachers in Zimbabwe operate, such as heavy teaching loads, poor remuneration and delays in payment of their salaries by the government. School principals and school counsellors concurred that the primary school curriculum was so broad that one teacher had to teach at least 10 subjects. This load was considered to be so heavy that it could not allow teachers who volunteered to be school counsellors to attend to psychosocial needs of OVC. In addition, it emerged that the morale of teachers was low due to low salaries and delays in payment of their salaries. These factors were noted to compromise provision of psychosocial support to OVC.

6.8.3 Lack of Workshops for School Counsellors

The study found that all school counsellors in this study did not receive counselling training during their pre-service teacher training. Furthermore, there were no workshops or training offered to lay school counsellors to equip them with necessary skills for handling OVC. It emerged that at times, some NGOs conducted training workshops; however, the participants reported that such workshops tended to be general and not focused on the OVC challenges, probably because of lack of funding by the Ministry of Primary and Secondary Education. To address the lack of trained school counsellors, the participants suggested that counselling and life skills orientation should be incorporated into the pre-service teacher training curriculum to ensure that every qualified teacher had some basic knowledge of handling OVC.

6.8.4 Teachers' Training in Dealing with OVC

Teachers play an important role in creating a school environment that is responsive to the welfare of OVC. Thus, this section focuses on the teachers' knowledge to handle OVC.

6.8.4.1 Teachers' knowledge in handling challenges confronting OVC

The study revealed that there were no teachers who specialised in counselling. All teachers in the sampled schools including those who volunteered to be school counsellors did not receive training on handling and dealing with OVC. It emerged that those who volunteered as school counsellors were finding it difficult to attend to the multifarious needs of OVC because of various factors which include lack of special skills in counselling, lack of cooperation from fellow teachers, heavy teaching loads and the increasing numbers of OVC in schools. Lack of special skills in handling OVC was worsened by lack of workshops as alluded to in section 6.8.3. It also emerged that some teachers were reluctant to assist OVC in their classes even over minor issues, claiming to be ill-equipped to assist. Consequently, school counsellors ended up failing to cope with large numbers of OVC referred to them for assistance.

The participants suggested that the Ministry of Primary and Secondary Education should ensure that pre-service training of counsellors is done in colleges to fully prepare teachers to operate in schools and classrooms with OVC.

6.8.4.2 Lack of resources and support

The study established that there were no school-based policies designed to assist OVC. It also emerged that lack of such policies resulted in uncoordinated activities relating to OVC. The

study revealed that in one school, some teachers were assisting OVC materially, but were not guided by school policy, and as a result, it was done in a haphazard manner. Moreover, some school counsellors bemoaned lack of assistance from the school administration in their efforts to support OVC. School counsellors complained that school principals were diverting funds targeting to assist OVC to other areas like sports. The study also revealed that the Psychological Services Department, a subdivision of the Ministry of Primary and Secondary Education responsible for assisting learners with learning difficulties was not visiting schools to fulfil its mandate. Consequently, such learners ended up being handled by school counsellors with limited skills.

6.8.4.3 Teacher demotivation

The study revealed that one of the challenges that hampered schools to respond to the needs of in-school OVC was teacher demotivation. Teacher morale in the sampled schools was found to be very low. The participants further identified various factors that contributed to teacher demotivation, and these included poor conditions of service and drastic changes introduced in the school curriculum by the Ministry of Primary and Secondary Education. It was proposed that teachers could make use of e-learning for professional upgrading with respect to counselling and life skills orientation and assist OVC adequately. However, it was noted that they lacked the zeal because of poor conditions of service. To address this, the participants proposed that the government should improve conditions of service for teachers so that they could do their work diligently and attend to OVC appropriately.

6.9 STRUCTURES AND PROGRAMMES IN SCHOOLS TO ADDRESS THE NEEDS OF OVC

This section summarises the situation in rural primary schools in the Masvingo district with regard to the availability of structures and programmes aimed at addressing various needs of in-school OVC.

6.9.1 The BEAM

The study found that one of the major interventions that assisted OVC in all three schools was BEAM. BEAM catered for school fees of OVC identified by a selection committee, which comprised community members and school administrators. The study revealed that the BEAM scheme was fraught with challenges, which compromised the achievement of its intended goals. The challenges of BEAM raised by participants included unfairness of the committee in

selecting BEAM beneficiaries, late disbursement of BEAM funds to schools, and reduction in the number of BEAM beneficiaries assisted by the government. Taken together, all these limitations of BEAM were noted to disadvantage in-school OVC significantly. In view of the shortcomings of BEAM, the participants suggested that the government should revise the policy on the implementation of the scheme so that more OVC could be catered for.

6.9.2 School feeding scheme

The study found that schools were implementing a small-scale feeding programme catering for infant and pre-school learners only. However, it was reported that the feeding scheme was sponsored by the government and that the programme had been scaled down due to a lack of adequate funding. The study revealed that lack of a comprehensive feeding scheme resulted in high dropout rates among in-school OVC as well as erratic school attendance. Another problem linked to this was poor concentration and participation of learners in class, which impacted negatively on their learning. It also emerged from the findings of the study that schools had no capacity to sustain school feeding programmes with no support from the government and other stakeholders.

6.9.3 Guidance and Counselling School Curriculum

The study established that guidance and counselling was part of the school curriculum in all three sampled schools, and was accordingly scheduled in the timetable. Responses from OVC during FGDs, however, revealed that guidance and counselling was not taught seriously and that teachers used periods allocated to this to teach other subjects that were examinable. The study also found that there were no peer counsellors in all three sampled schools.

6.9.4 Fundraising Projects

This study established that there were no fundraising projects meant to assist in-school OVC. It emerged that one out of three sampled schools was running a poultry project to assist some OVC through payment of school fees. The study also revealed that schools were not carrying out school-based projects because of lack of capital. In the same vein, the schools were reported to be struggling to procure basic teaching and learning materials; hence, they could not afford projects without external assistance. It was established during the empirical study that school B, which was running a poultry project, was given capital by a non-governmental organisation. However, this project was not raising enough funds, and as a result, only two OVC were

sponsored. The participants suggested that the government or NGOs should sponsor school-based projects in order to capacitate schools to address the needs of OVC.

6.10 STRATEGIES TO IMPROVE THE WELFARE OF IN-SCHOOL OVC

The study revealed that in-school OVC encounter various challenges which include lack of food, stigmatisation and discrimination. Participants in this study suggested various strategies to improve the situation of OVC which include allocation of specialist counsellors to schools; organising workshops for teachers and principals to deal with OVC; introduction of children's clubs or peer counsellors; and collaboration of schools and communities to assist OVC among other interventions. The following section examines how the suggested interventions are likely to alleviate the challenges confronting OVC.

6.10.1 Deployment of Specialist School Counsellors in Schools

Lack of specialist school counsellors was noted by all the participants in this study, as one of the factors that prevent schools from responding to the needs of OVC adequately. Thus, as a way of capacitating schools in this regard, the participants suggested that the Ministry of Primary and Secondary Education should train school counsellors and deploy them in schools. They also suggested that school counsellors should be relieved of teaching duties so that they could concentrate on counselling. This implies that life orientation skills are critical for OVC; hence schools can assist OVC significantly by implementing robust counselling programmes that can be readily available to all learners including OVC.

6.10.2 Workshops for Teachers and Principals in Handling OVC

The study revealed that the number of in-school OVC is so high that two school counsellors cannot manage this. The increase in the number of OVC in schools implies that teachers and principals should be adequately trained to operate in schools with OVC. In this regard, all the participants in this study concurred that teachers and principals should be trained on areas relating to OVC care and support in order to respond effectively to their multifarious needs. Conducting workshops for all teachers in schools on ways of handling OVC would relieve pressure on school counsellors as the number of in-school OVC is increasing. The current study revealed that OVC confront various challenges such as lack of food, stationery, stigma and discrimination. These problems are so complex that teachers need to be trained in order to respond to the challenges effectively. Such findings justify the need for training of teachers and school administration in OVC care and support with a view to improve their welfare.

6.10.3 Peer-Counselling Programmes and Child Care Teams

This study revealed that school counsellors were overwhelmed by the number of in-school OVC that need assistance. The situation of school counsellors is exacerbated by the fact that they have full teaching loads leaving them with limited time to attend to OVC. In view of the above, participants in this study, proposed that schools should have peer counsellors and CCT to work hand in hand with school counsellors. The participants maintained that these intervention strategies would augment the efforts of school counsellors and help in creating a friendly school environment for all learners including OVC.

6.10.4 Government and the Sponsorship of the BEAM Scheme

This study found that OVC face multiple challenges such as lack of food, stationery, school fees and school uniforms among others. The study also found that some OVC's tuition is paid by the government through an educational scheme called BEAM. In view of the inadequacy of BEAM to cover all the educational costs for the recipients, the researcher contends that the situation of in-school OVC can be improved if OVC are empowered through training them in life skills, for example, welding and carpentry to mention but a few. As way of retaining OVC in schools, the participants proposed that the government should increase the allocation of BEAM funds to cover fees and non-fee costs. This would go a long way towards reducing dropout rates of in-school OVC.

6.10.5 Resuscitation of a Comprehensive School feeding programme

Interviews conducted with principals and school counsellors as well as FGDs held with learners revealed that some OVC came to school hungry. To ameliorate the challenge of food confronted by in-school OVC, participants suggested that the government and the donor community should form partnerships to sponsor school feeding programme. This study revealed that currently there is a school feeding programme in rural primary schools targeting pre-school and infant learners only. The feeding programme was viewed by the participants as inadequate since it left out many deserving learners. Another suggestion put forward by the participants to tackle the problem of lack of food in schools was that the government or NGOs should sink boreholes at each school in order to allow them to establish nutritional gardens. Related to nutritional gardens was the idea that rural primary schools should be allocated pieces of land by traditional leaders. The participants suggested that if schools were given land they

could grow staple crops that would be used to support the school feeding programme. In view of this critical role of schools, owning a piece of land becomes imperative.

6.10.6 School-Community Partnerships

The participants also suggested that there should be partnerships between the school and the community on issues affecting the school climate in general, and the welfare of OVC in particular. They suggested that there should be community facilitators who should work together with school counsellors. The community facilitators could bring information to the school on the welfare of in-school OVC in their communities. The school counsellors together with the community facilitators could decide on the appropriate interventions to assist OVC. The participants suggested that schools should take advantage of parent-teacher associations to deliberate on and come up with, solutions to the challenges faced by OVC.

The strategy to improve the well-being of in-school OVC through forming school-community partnerships is in line with Bronfenbrenner's (1979) ecological model as well as Coleman's (1988) and Bourdieu's (1986) social capital theories. The mesosystem and exosystem levels of Bronfenbrenner's (1979) ecological model emphasise on partnerships between and among different institutions in the child's environment to ease the fulfilment of the child's needs. Thus, the participants suggested that if school-community partnerships are formed the welfare of in-school OVC can be improved. Coleman's (1988) theory views social capital as a mode of social structure that eases the achievement of goals of an individual in a structured context. Coleman (1988:98) stresses on the importance of social capital outside the family in the realisation of goals by individuals. To Coleman (1988) social capital outside the family, that is social relationships among parents and relationships with institutions of the community are critical in addressing an individual's needs. He further elaborates that both social capital in the family and in the community surrounding the school contribute significantly to reduce learners' dropout rate (Coleman, 1988:102). Thus viewed through the lens of Coleman's theory of social capital, school-community partnerships as a strategy to address the needs of in-school OVC can empower rural primary schools to respond to the needs of OVC adequately. Bourdieu's concept of social capital also acknowledges the importance of networks or partnerships to an individual (Bourdieu, 1986:63). To Bourdieu (1986) social capital refers to the aggregate of current or potential resources related to existing networks. An individual can use networks or relationships with other individuals or institutions to achieve a goal such as education (Bourdieu, 1990:85). Thus in the light of Bourdieu and Coleman's concepts of social capital,

social networks such as school-community partnerships are sound strategies schools can adopt to address the needs of in-school OVC.

6.11 CONTRIBUTION OF THE STUDY TO SCHOLARSHIP

The previous section covered recommendations of the study. This section focuses on the contributions of the current study to the body of knowledge. Coleman's social background theory and Bourdieu's cultural capital theory undergird the current study. The theories emphasise on social background as a major determinant of a child's educational opportunities. In the context of OVC, the financial capital, social capital and human capital of their social backgrounds were found to impact negatively on their welfare. This study, therefore, contributes by exposing principals, teachers and counsellors to theories they can apply in designing and implementing school-based programmes aimed at assisting in-school OVC.

Moreover, previous research on OVC tended to focus on OVC in general, while this study is one of the few that focused on in-school OVC. In this regard, the current study contributes to discourse on the welfare of in-school OVC and suggest possible strategies that can be implemented to address the challenges.

It also emerged from the study that schools can be empowered through forming partnerships with different players like NGOs, local community and government to provide care and support to in-school OVC. Partnerships at different levels are supported by Bronfenbrenner's ecological theory and the social capital theory by Bourdieu and Coleman. If the school partnerships with different players are backed by theory such as the social capital, the situation of in school OVC can be improved significantly but the problem is that the theoretical knowledge remains the province of academics while those involved in the partnerships are ignorant. Thus the researcher contends that theory and practice should be integrated so as to get the best out of the proposed interventions.

Lastly, the thesis contributes to scholarship in that the results and recommendations of the study can stimulate further research on issues around the welfare of in-school OVC.

6.12 LIMITATIONS OF THE STUDY

The researcher encountered some challenges at different stages of the study which impacted on its progress and the reliability and validity of data gathered to a certain extent. The

researcher, however, made efforts to circumvent these challenges. The challenges encountered and strategies employed to resolve them are as stated below:

- The researcher observed that because of poor conditions of service for teachers, the school principals and counsellors in the sample were not interested in this research, which did not seem to be aimed at improving their conditions. Because of that, the researcher spent more time explaining the purpose and benefits of the study to the participants. Eventually, the respondents cooperated with the researcher.
- Time and resource constraints impacted on the number of schools and the size of the sample studied. Because of time and financial constraints, this study focused on three rural primary schools and 15 OVC in Grade 7. If time and resources were available, urban primary schools could have been included, as well as OVC from lower grades to gain a better understanding of the challenges confronting OVC in primary schools.
- I noted that political polarisation in the country made my acceptance in rural schools difficult. Besides producing my identification particulars, letters of approval from the Ministry of Primary and Secondary Education and University of South Africa, the school principals referred me to local leadership for clearance. This consumed valuable time for research. I eventually got through all the bottlenecks and conducted the study as planned.
- FGDs held with OVC were conducted in the afternoons when other learners were playing sport or engaged in general cleaning, and this caused some OVC to be restless and lose concentration on issues discussed. The researcher dealt with this challenge by stopping the discussions at intervals to remind the participants the purpose of the group interviews.

6.13 RECOMMENDATIONS

The previous section dealt with structures and programmes that schools can implement to address the needs of in-school OVC. This section covers recommendations of the study that emanated from literature reviewed and empirical data.

6.13.1 Recommendations for the Government

This section covers recommendations for the government which may improve the capacity of schools to deal with the challenges confronting in-school OVC.

6.13.1.1 Improvement of the BEAM programme

The study recommends that the government should prioritise funding of BEAM in its national budget in order to assist as many in-schools OVC as possible

6.13.1.2 Expansion of the school-feeding scheme

This study recommends that the government should expand the school-feeding programme by way of injecting more funds into the scheme, so that all in-school OVC could be catered for.

6.13.1.3 Improving conditions of service for teachers

Based on the findings of the study it is recommended that the government should improve the conditions of service for teachers in order to boost morale and eventually improve the welfare of in-school OVC.

6.13.1.4 Staff development of teachers to handle OVC

To address the problem of lack of trained teachers in dealing with OVC, the study recommends that the government should allocate funds to the Ministry of Primary and Secondary Education earmarked for staff development on care and support of OVC.

6.13.2 Recommendations for the Ministry of Higher and Tertiary Education

This sub-section focuses on recommendations for the Ministry of Higher and Tertiary Education, which, among others, has an oversight role on the operations of teachers' colleges.

6.13.2.1 Review of teacher colleges curriculum

To deal with the problem of lack of specialist counsellors in schools, this study recommends that the Ministry of Higher and Tertiary Education should review the curriculum offered by teachers' colleges with a view to including guidance and counselling.

6.13.3 Recommendations for the Ministry of Primary and Secondary Education

This section covers recommendations for the Ministry of Primary and Secondary Education, which monitors and evaluates curriculum implementation in schools, among others.

6.13.3.1 Support the school psychological department

The study recommends that the Ministry of Primary and Secondary Education should revitalise the School Psychological Services Department by ensuring that it is well-staffed and funded for it to carry out its mandate of assisting learners facing psychological problems effectively.

6.13.3.2 Allocating school counsellors a lighter workload

To improve counselling services offered by the school-counsellors, it is recommended that school management should determine the amount of time needed to provide adequate counselling services so that counsellors are allocated fewer subjects to teach and or are given less demanding responsibilities like sports coaching.

6.13.4 Recommendations for Principals

The previous sub-section covered recommendations for the Ministry of Primary and Secondary Education. This part of the thesis covers recommendations for the principals.

6.13.4.1 Establishment of peer counsellors and CCT

Consequently, this study recommends that principals should appoint peer counsellors and establish CCT in schools as a way of encouraging student-student counselling

6.13.4.2 Starting school-based projects meant to assist in-school OVC

The study recommends that principals should prioritise funding of school-based projects as a way of capacitating schools to address the needs of in-school OVC.

6.13.5 Recommendations for NGOs

The preceding sub-section dealt with recommendations for the principals. This last section of recommendations covers recommendations for NGOs.

6.13.5.1 NGOs should be apolitical

The study recommends that NGOs should be apolitical in their operations in order to forge good relationships with the government and other local authorities for the benefit of vulnerable groups like OVC.

6.14 A MODEL TO IMPROVE THE WELFARE OF IN-SCHOOL OVC

Based on the literature review and research findings, the researcher developed a model (Figure 6.1) that can be used as a guide in the formulation and implementation of programmes meant to address the welfare of in-school OVC.

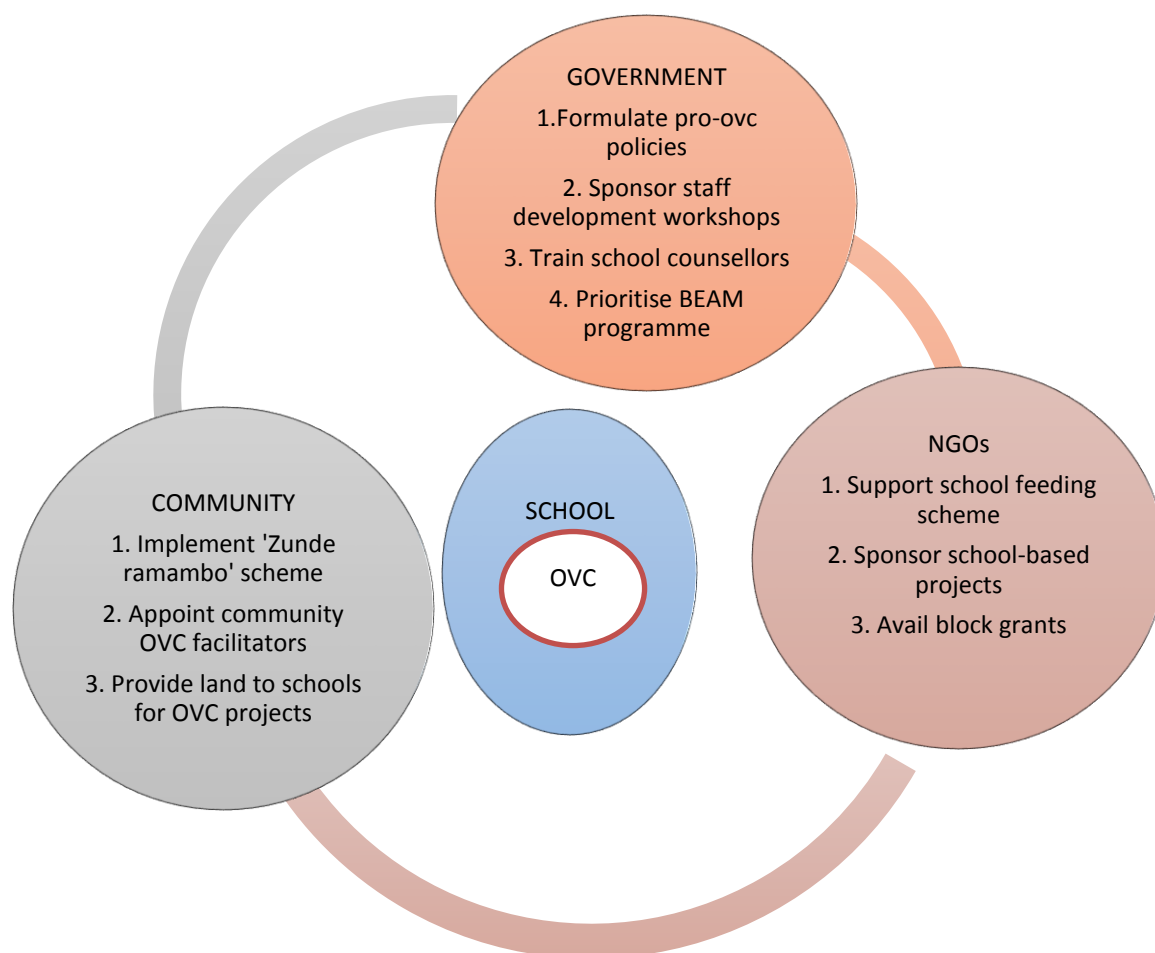


Figure 6.1: A model to improve the welfare of OVC

The proposed model has four interactive components, namely the government, NGOs, the local community and the school, which should play complementary roles in order to improve the welfare of in-school OVC. What emerged from the study is that on their own, schools have no capacity to meet the needs of in-school OVC; hence, the need for other stakeholders to be involved. The role of each of the different components of the model in supporting and caring for in-school OVC can be better understood when viewed through Bronfenbrenner's ecological theory as well as the capital theories of Coleman and Bourdieu. The section below focuses on this subject.

The government can play a critical role in empowering schools to respond to the needs of OVC by formulating pro-OVC policies like fee waiver as well as training specialist counsellors in teachers' colleges to deal with in-school OVC adequately. The study revealed that staff-development workshops aimed at equipping teachers with the knowledge to handle OVC were not conducted. The model suggests that the government should provide funds for staff-development workshops on OVC matters. The BEAM programme was found to be fraught with problems like delay in the disbursement of funds and non-coverage of non-fee costs. The model proposes that the government should ensure that BEAM funds are disbursed on time so that OVC are not denied access to classrooms because of late payment of fees.

The suggested interventions the government can implement to empower rural primary schools to be responsive to the needs of OVC are in tandem with Bronfenbrenner's ecological model and the social capital theories of Coleman and Bourdieu. According to Bronfenbrenner (1979:40), the environment in which a child develops has five systems that should work for the proper development of the child. The five systems are micro, meso, exo, macro and chrono (Bronfenbrenner, 1979:41). The government's role falls under the macrosystem (Seruwagi, 2012:68). To Bronfenbrenner (1979:41) the macrosystem is a broader context in which all systems are embedded and includes government policies, treaties and conventions that affect the child. Government policies that affect the welfare of in-school OVC identified in this study where the government as a critical component of the macrosystem is expected to address include disbursement of BEAM funds, fees-waiver and sponsorship of workshops for teachers and administrators (see section 5.4.3). Against this backdrop this study envisages that pro-OVC government policies can improve the well-being of in-school OVC.

This study also identified NGOs as critical in improving the welfare of in-school OVC hence are an integral component of the proposed model. In the context of Bronfenbrenner's (1979) ecological model, NGOs fall under the exosystem. Although individuals do not experience the exosystem everyday it was found to impact significantly on the lives of individuals (Seruwagi, 2012:68). The components of the exosystem include government institutions and NGOs (Bronfenbrenner, 1979:41). Thus, NGOs can support schools through sponsoring school feeding schemes as well as forming partnerships with the community and some government institutions like schools in projects aimed at supporting OVC. Such linkages and relationships are of great value to the welfare of the child as alluded to in Coleman's (1988) and Bourdieu's (1986) theories of social capital (see section 2.2.1.1).

The model to improve the welfare of OVC has the local community as one of the key components. The home and local community fall under the mesosystem in Bronfenbrenner's ecological model (Bronfenbrenner, 1979:40). The mesosystem emphasises on linkages between elements of the microsystem such as the school, community and peers for the good of the individual. In the context of this study linkages between the school and community can improve the welfare of in-school OVC in various ways. One way through which the school and the community can partner is through the Zunde raMambo or chief's granary programme aimed at producing food to assist the disadvantaged such as OVC and the elderly. The community can also appoint OVC community facilitators who could work together with school counsellors and allocate pieces of land to schools to use as nutritional gardens. To Bronfenbrenner such linkages are crucial for the development of a child. Coleman's (1988) and Bourdieu's (1986) social capital theories also emphasise the importance of relationships or networks within and beyond the family for the attainment of educational goals by learners (Bourdieu, 1986:63; Coleman, 1988:113). The researcher thus contends that such networks and linkages should be encouraged in rural primary school for the betterment of the welfare of all learners including OVC.

The school as an institution which deals with in-school OVC should not operate in isolation in its quest to fulfil their needs. The interactive relationship illustrated by the suggested model indicates that given the support by other components of society, a school can respond to the needs of in-school OVC through implementation of various interventions, such as school feeding programmes, teaching guidance and counselling, and implementing fee waiver policy, among others. The school as part of the model to improve the well-being of in-school OVC is critical in the welfare of a child. The school is a component of the microsystem in Bronfenbrenner's ecological model (Bronfenbrenner, 1994: 39). According to Bronfenbrenner (1979:38) interactions that occur in the person's immediate environment encourage or discourage the fulfilment of the needs of a child. Relationships and networks within and outside the school should therefore be good enough to facilitate fulfilment of the needs of OVC. The social capital theory by Bourdieu (1986) and Coleman (1988) also values the quality of relationships and networks in the person's environment to ease achievement of goals such as education. The school can also assist in improving the welfare of in-school OVC by identifying, developing and updating the database of these children for use by organisations that might want to assist OVC. In addition, the school can identify the needs of OVC and recommend the kind of support needed.

6.15 RECOMMENDATIONS FOR FURTHER STUDY

Based on the findings and conclusions of the study, further research is recommended in the following areas:

1. A study on the efficacy of strategies implemented in rural secondary schools to address the needs of in-school OVC.
2. Challenges confronted by traditional leaders in implementing Zunde raMambo or the chief's granary programme aimed at improving the welfare of OVC.
3. The role of NGOs in the education of OVC in secondary schools in Masvingo district.
4. Possibilities and challenges of implementing peer-counselling as a strategy in addressing the psychosocial needs of OVC in primary schools in Zimbabwe.
5. The responsiveness of Zimbabwe teachers' colleges curriculum to the needs of OVC.
6. The efficacy of BEAM in fulfilling the educational requirements of OVC in primary and secondary schools in Zimbabwe.

6.16 CONCLUSION

The aim of this study was to establish the preparedness of rural primary schools in Zimbabwe to address the needs of in-school OVC. The study was conducted in Masvingo district, Zimbabwe where three rural primary schools were purposively selected. A qualitative approach was adopted in which a phenomenological research design was employed. The participants and data collection methods were triangulated to facilitate the trustworthiness of qualitative data. The findings of the study established that rural primary schools were ill-equipped to respond to the needs of in-school OVC. The results indicate that rural primary schools lack qualified school-counsellors, financial and material resources to respond to the needs of in-school OVC. The study also established that rural primary schools can be capacitated to address the needs of OVC through forming partnerships with other institutions of society such as the government, NGOs and the community. It is therefore hoped that if schools embrace insights from Bronfenbrenner's ecological theory as well as Coleman and Bourdieu's social capital theory which emphasise on social networks they can be in a better position to address the needs of in-school OVC.

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APPENDICES

APPENDIX A:LETTER OF PERMISSION TO CARRY OUT RESEARCH FROM THE MINISTRY OF PRIMARY AND SECONDARY EDUCATION, ZIMBABWE

*All communications should be addressed
to "The Secretary for Primary and
Secondary Education"
Telephone: 734051/59 and 734071
Telegraphic address : "EDUCATION"
Fax: 734075*



Reference: C/426/3 Masvingo

Ministry of Primary and
Secondary Education
P.O Box CY 121
Causeway
Harare

11 February 2016

Mr C.Dekeza
Great Zimbabwe University
P.O Box 1235
Masvingo

**RE: PERMISSION TO CARRY OUT RESEARCH AT BARAHANGA; MASHAPA
SDA AND MUCHIBWA PRIMARY SCHOOLS: MASVINGO DISTRICT:
MASVINGO PROVINCE**

Reference is made to your application to carry out a research in the above mentioned schools in Masvingo Province on the research title:

**"THE RESPONSIVENESS OF RURAL PRIMARY SCHOOLS IN ZIMBABWE TO
THE NEEDS OF ORPHANS AND VULNERABLE CHILDREN"**

Permission is hereby granted. However, you are required to liaise with the Provincial Education Director Masvingo Province, who is responsible for the schools which you want to involve in your research.

You are required to provide a copy of your final report to the Secretary for Primary and Secondary Education by December 2016.

A handwritten signature in dark ink, appearing to read 'E. Chinyowa'.

E. Chinyowa
Acting Director: Policy Planning, Research and Development
For: **SECRETARY FOR PRIMARY AND SECONDARY EDUCATION**

cc: P.E.D. Masvingo Province

**APPENDIX B: PERMISSION TO CARRY OUT RESEARCH IN PRIMARY
SCHOOLS IN MASVINGO DISTRICT, ZIMBABWE**

*ALL communications should be
addressed to
"The Provincial Education Director
for Primary and Secondary
Education"*

Telephone: 263585/264331

Fax: 039-263261



Ref: C/426/3

Ministry of Primary and Secondary
Education
P. O Box 89
Masvingo

12 February 2016

Mr C. Dekeza
Great Zimbabwe University
P. O. Box 1235
Masvingo

**RE: PERMISSION TO CARRY OUT RESEARCH AT BARAHANGA, MASHAPA
SDA AND MUCHIBWA PRIMARY SCHOOLS: MASVINGO DISTRICT:
MASVINGO PROVINCE**

Reference is made to your application to carry out a research at the above
mentioned schools in Masvingo District on the research title:

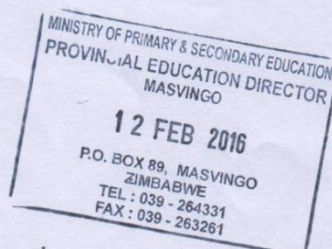
**'THE RESPONSIVENESS OF RURAL PRIMARY SCHOOLS IN ZIMBABWE TO
THE NEEDS OF ORPHANS AND VULNERABLE CHILDREN'**

Please be advised that the Secretary for Primary and Secondary Education has
granted permission to carry out your research.

You are also advised to liaise with the District Education Officer who is responsible
for the schools which are part of the sample for your research.

A handwritten signature in blue ink, appearing to read 'Z. M. Chitiga'.

Z. M. Chitiga
Provincial Education Director
MASVINGO PROVINCE



**APPENDIX C: PERMISSION TO CARRY OUT RESEARCH IN PRIMARY
SCHOOLS IN MASVINGO DISTRICT, ZIMBABWE**

Great Zimbabwe Universities: 0773902651

P.O.Box1235dekezaclys@gmail.com

Masvingo

10 February 2016

The Secretary of Education

Ministry of Primary and Secondary Education

P.O. Box CY 121

Harare

**REF:REQUEST FOR PERMISSION TO CARRY OUT RESEARCH IN PRIMARY
SCHOOLSIN MASVINGODISTRICT**

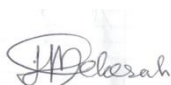
I am a Lecturer at Great Zimbabwe University and a Doctoral Student at UNISA doing DED-Socio Education. I am kindly requesting for permission to carry out a study in primary schools in Masvingo district. My study is on *The Responsiveness of Rural Primary Schools in Zimbabwe to the needs of Orphaned and Vulnerable Children.*

The participants for this study are orphaned and vulnerable children, school counsellors and principals. The study will employ focus group and in-depth interviews. I also expect to use document analysis. The researcher will seek consent of participants before the commencement of the study. For minors (learners) consent of parents or guardians will be sought.

For all enquiries relating to this study you are free to contact Dekeza Clyton, cell +263773 902651, E-mail address, dekezaclys@gmail.com or my supervisor Professor M.Lekhetso at +27797448090; Email lekhem@unisa.ac.za

I greatly appreciate your help.

Yours sincerely



C. DEKEZA (MR)

**APPENDIX D: LETTER TO THE PROVINCIAL EDUCATION DIRECTOR
SEEKING PERMISSION TO CARRY OUT RESEARCH IN PRIMARY SCHOOLS
IN MASVINGO DISTRICT, ZIMBABWE.**

Great Zimbabwe University Ref: 0773902651

P.O. Box 1235dekezaclys@gmail.com

MASVINGO

10 February 2016

The Provincial Education Director

Ministry of Primary and Secondary Education

P.O. Box 89

MASVINGO

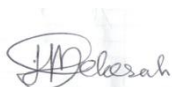
**REF:REQUEST FOR PERMISSION TO CARRY OUT RESEARCH IN PRIMARY
SCHOOLSIN MASVINGODISTRICT**

I am a Lecturer at Great Zimbabwe University and a Doctoral Student at UNISA doing DED-Socio Education. I am kindly requesting for permission to carry out a study in primary schools in Masvingo district. My study is on *The Responsiveness of Rural Primary Schools in Zimbabwe to the needs of Orphaned and Vulnerable Children*.

The participants for this study are orphaned and vulnerable children, school counsellors and principals. The study will employ focus group and in-depth interviews. I also expect to use document analysis. The researcher will seek consent of participants before the commencement of the study. For minors (learners) consent of parents or guardians will be sought. For all enquiries relating to this study you are free to contact Dekeza Clyton, cell +263773 902651, E-mail address, dekezaclys@gmail.com or my supervisor Professor M.Lekhetho at +27797448090; Email lekhem@unisa.ac.za

I greatly appreciate your help.

Yours sincerely



C. DEKEZA (MR)

APPENDIX E:REQUEST FOR PERMISSION FROM SCHOOL HEADS

Great Zimbabwe University

P O Box 1235

Masvingo

Zimbabwe

The Head

.....
.....
.....

RE: REQUEST FOR PERMISSION TO CARRY OUT RESEARCH AT YOUR SCHOOL

I am a lecturer at Great Zimbabwe University and a Doctoral Student at UNISA doing DED – Socio-Education. I am kindly requesting for permission to carry out a study in your school. My study is on the responsiveness of rural primary schools in Zimbabwe to the needs of orphaned and vulnerable children. It examines the extent to which rural primary schools respond to the needs of in-school orphaned and vulnerable children.

The participants for this study are orphaned and vulnerable children, school counsellors and principals. The study will employ focus group interviews for students, in-depth interviews for principals and school counsellors. I also expect to use document analysis. The researcher will seek consent of participants before the commencement of the study. For minors (learners) consent of parents or guardians will be sought.

For all enquiries relating to this study you are free to contact Dekeza Clyton, cell +263773 902651, E-mail address, dekezacylys@gmail.com or Professor M.Lekhetho at +27797448090; Email lekhem@unisa.ac.za

SIGNATURE

Date

Signature of Researcher

Date

APPENDIX F: INFORMED CONSENT FORM

Principal investigator: Clyton Dekeza

Topic: The responsiveness of rural primary schools in Zimbabwe to the needs of orphaned and vulnerable children.

INTRODUCTION

This form spells out the acceptable conduct related to research participants. May you please read and understand the whole of it carefully. The study is a partial fulfilment of my doctoral thesis as required by UNISA College of Education, where I am doing my DED Socio Education. After gathering full information about this study may you decide whether you may volunteer as a participant?

PURPOSE OF RESEARCH

This study intends to explore the responsiveness of rural primary schools to the needs of orphans and vulnerable children with a view to recommending strategies that improve the schools to handle in-school orphans and vulnerable children.

PARTICIPANT'S ROLE IN THE STUDY

You have been purposively selected to participate In this study, by virtue of being the school head. If you volunteer to take part, you will participate in face-to-face interview for an estimation of an hour. You will be asked to share your views on how your school deals with challenges confronting in-school orphans and vulnerable children.

EXPECTED DURATION OF PARTICIPATION

The interview session is expected to last for one hour when you are free from your other duties. We may do it in phases if you so wish.

APPROXIMATE NUMBER OF PARTICIPANTS

A total of three school heads, six school counsellors and fifteen orphans and vulnerable children will be expected to take part in this study. All in all a total of twenty four participants will take part in the study.

BENEFITS OF THE STUDY

This study has no monetary benefits for the participants. However, through your participation, the findings and recommendations of this study will help to improve the well-being of in-school orphans and vulnerable children.

PROCEDURE FOR SELECTION OF PARTICIPANTS

You have been purposively selected on the basis that you are in school administration which is mandated to cater for the welfare of pupils including orphans and vulnerable children. It is

also important to note that your selection is also based on the realisation that you volunteer to take part in this study.

FORESEEABLE RISKS OR DISCOMFORTS TO PARTICIPANTS

This study is risk free. The researcher shall make sure that your views and concerns are respected.

GUARANTEE OF PRIVACY, ANONYMITY AND CONFIDENTIALITY

The research shall ensure that the participant's privacy is not invaded. The participants should note that they have the right to choose the extent to which they will share or withhold information about their behaviour, attitude or opinion. The privacy of the participants shall further be protected by observing the principles of anonymity and confidentiality. There will be no way for participants' names to be associated with their answers. The researcher will not disclose any data in individual form. This shall be achieved by aggregating data in some cases so that an individual's name is unknowable.

VOLUNTARY PARTICIPATION AND INVITATION TO ASK QUESTIONS

This form gives you full information about the study so that you decide whether to participate in the study or not based on information given. If you feel you want to withdraw even after the research commences you are free to do so without penalty. The participants also have a right to ask questions whenever they need clarification.

CONTACT DETAILS

For all enquiries relating to this study you are free to contact Dekeza Clyton, cell +263773 902651, E-mail address, dekezaclys@gmail.com or Professor M.Lekhetho at +27797448090; Email lekhem@unisa.ac.za

Signature of participant

Date

Signature of Researcher

Date

APPENDIX G:REQUEST FOR PERMISSION FROM PARENT/LEGAL GUARDIAN

Principal investigator: Clyton Dekeza

Topic: The responsiveness of rural primary schools in Zimbabwe to the needs of orphaned and vulnerable children.

I am a Doctor of Education student with UNISA doing a study on the responsiveness of rural primary schools in Zimbabwe to the needs of orphaned and vulnerable. The study needs the views of orphaned and vulnerable children, school counsellors and school heads. I am kindly requesting for your permission for your child to participate In this study, since he/she is a minor.

I would like to conduct a focus group interview with your child and others (about one hour long). I do not intend to disturb lessons. The audio-recorded focus group interview will be conducted at the school in the afternoon after lessons. Participation In this study, is voluntary and the participants can withdraw from the research at any time at no cost. All issues of confidentiality will be adhered to. The data gathered In this study, will be used only for research purposes. Anonymity of learners In this study, is enhanced by use of pseudonyms hence the identity of your child will not be disclosed. The research will comply with the research ethics as approved by the University of South Africa.

For more information related to this study you are free to contact Dekeza Clyton, Cell: +263 773 902651, e-mail address, dekezaclys@gmail.com or Professor M.Lekhetho at +27797448090; Email lekhem@unisa.ac.za

May you indicate by signing below if you consent that your child participates.

Name of learner

Grade

Signature of Parent/Legal Guardian

Date

Signature of Researcher

Date

APPENDIX H: CHILD ASSENT PROMPT SHEET

Principal Investigator: Clyton Dekeza

Topic: The responsiveness of rural primary schools in Zimbabwe to the needs of Orphan and vulnerable children

Brief Introduction

This assent form guides the learner on what it means to take part in the research study. It also invites the learner to participate in the research if he/she is willing to do so. Therefore, it is important for you to read it carefully and then decide if you wish to be a volunteer participant. The study is in partial fulfilment of my doctoral thesis as required by the College of Education, University of South Africa (UNISA).

Purpose

This study intends to explore the extent to which rural primary schools respond to the needs of in-school orphaned and vulnerable children.

Procedure

You will be grouped with other learners and the researcher will ask you to take turns to answer interview questions. The answers will be recorded using an audio-recorder.

Confidentiality

Your names will not be disclosed and the information you are going to provide will be kept safely by the researcher and will be destroyed upon completion of the study. The data reported in the final write-up of the thesis may be presented at professional gatherings and published in educational journals without naming participants.

Possible Risks

There will be no risks involved. However, some learners may feel uncomfortable to sit for one hour. There will be a break and learners are free to have some drinks which will be provided.

Benefits to Participants

There will be no benefit in form of money or otherwise for individuals taking part in this study. Learners may benefit later when the results of this study are published.

Duration

The participants will be asked to respond to interview questions orally for approximately one hour. If participants wish to continue with the interview, their request will be accommodated.

Invitation to participate

Having outlined the research study, I kindly invite you to take part in the research. If you are willing to take part in the research you can indicate by signing the assent form below. You are also advised to discuss your decision with your parent or guardian before you sign the assent form. On behalf of the learners, the researcher will ask the parent/guardian to grant you permission to take part in the research. The parent/guardian will be given a copy of this form.

Participant's rights

Participants have the right to ask questions related to the research and their participation in the study. Contact Dekeza Clyton at +263 773 902 651 E-mail dekezaclys@gmail.com **OR** the researcher's promoter Professor M.Lekhetho at +27797448090; Email lekhem@unisa.ac.za

Voluntary Participation

Your participation In this study, is voluntary. You are free to withdraw at any time without penalty.

Assent to participate in the study

I have read and understood what it involves to take part in a study. I therefore agree to participate freely and voluntarily.

Signature of (Volunteer) Participant:.....

Date:.....

Signature of Investigator:.....

Date:.....

SECTION B: THE MAGNITUDE OF OVC AND CHALLENGES ENCOUNTERED.

1. What is the magnitude of the OVC phenomenon at your school?
2. Comment on the gender composition of OVC at your school?
3. What challenges do in-school OVC encounter?

SECTION C:PROVISION OF MATERIAL NEEDS TO IN-SCHOOL OVC

4. What material challenges are confronted by OVC at your school?
5. Are there structures in the school to assist in providing for material needs of OVC?
6. Does your school have a feeding scheme for OVC?
7. Who is funding the scheme?
8. Comment on the success of the scheme
9. Are there NGOs assisting OVC at your school?
10. What type of assistance does the organisation render to OVC?
11. (a) Are there school-based policies targeting to assist OVC?
11. (b) List them and what they entail.

SECTION B: PROVISION OF PSYCHOLOGICAL NEEDS TO IN-SCHOOL OVC

- 12 In your view what are the OVC's primary psychological needs?
- 13 (a) Are there structures in your school to address the psychological needs of OVC?
- 13(b) List them and their terms of reference.
- 14 Does your school have a school counsellor?

15 Comment on the role function of the school counsellor in addressing the needs of OVC.

16 Does your school have peer counsellors?

17 In your view are peer-support groups important in addressing the needs of OVC?

SECTION E: TEACHERS' TRAINING IN HANDLING OVC

18 In your opinion are teachers at your school trained to deal with issues arising from having OVC in their classrooms?

19 How do you view the relationship between OVC and teachers?

20 What role does guidance and counselling teachers play in addressing the needs of OVC?

21 What challenges militate against teachers at your school to address the needs of OVC?

22 In your opinion, how effective is the Basic Assisted Education Module [BEAM] in meeting the educational needs of OVC?

SECTION F: EFFECTIVENESS OF SCHOOL-BASED PROGRAMMES IN ADDRESSING THE NEEDS OF OVC.

23 Evaluate the effectiveness of school-based programmes targeting OVC.

SECTION G: SUGGESTIONS TO IMPROVE SCHOOLS IN RESPONDING TO THE NEEDS OF OVC.

24 Suggest ways by which School Heads can be empowered to assist in-school OVC adequately.

25 Suggest ways by which teachers can be capacitated to deal with challenges confronting OVC in their classrooms.

26 Suggest ways by which rural primary school environments can be more accommodative to OVC.

27 Do you have anything else to say about OVC that might improve their well-being?

APPENDIX J: INTERVIEW SCHEDULE FOR SCHOOL COUNSELLORS

Topic: The responsiveness of rural primary school in Zimbabwe to the needs of OVC

INTERVIEW ITEMS FOR SCHOOL COUNSELLORS

INTRODUCTION

My name is Clyton Dekeza. I am a UNISA PhD student, conducting a research on the Responsiveness of Rural Primary Schools in Zimbabwe to the Needs of Orphans and Vulnerable Children.

Place _____ of

interview.....Date.....Time.....

SECTION A: DEMOGRAPHIC DATA

• Sex:Male _____ ☐ Female-_____ ☐

• Age in years 25-30 _____ ☐ 30-35_____ ☐

35-40 _____ ☐ 40-45_____ ☐

45 and above_____ ☐

• Experience in the post

Below 5yrs _____ ☐ 5-10 years _____ ☐

10-15 years _____ ☐ 15-20 years _____ ☐

20 years and above_____ ☐

• Professional Qualifications

Diploma in Education_____BED ☐ ary_____ ☐

BED (Secondary)_____MED ☐

☐

SECTION B: SCHOOL COUNSELLORS' TRAINING TO DEAL WITH OVC

1. a) Did you receive special training to deal with problems confronting OVC?

b) What skills did you acquire that are useful to your role as a school counsellor?
2. Does the school administration support you adequately to carry out your mandate?
3. a) Does your district conduct workshops for school counsellors?

b) How often are the workshops conducted?

SECTION C: MAGNITUDE OF THE OVC PHENOMENON IN THE SCHOOL?

1. What is the magnitude of the OVC phenomenon in your school?
2. Comment on the gender composition of OVC at your school?

SECTION D: MATERIAL CHALLENGES CONFRONTING OVC

1. What material challenges are confronted by OVC at your school?
2. How do you assist OVC confronting material problems to fulfil their educational aspirations?
3. a) Are there structures in the school to cater for the material needs of OVC?

b) Comment on the effectiveness of school-based interventions to address the material needs of OVC.

SECTION E: PSYCHOLOGICAL CHALLENGES CONFRONTING OVC

4. In your view what are the common psychological problems confronted by OVC at your school?
5. How do you assist OVC to overcome psychological problems?
6. Comment on the relationship between your school and the school psychological services department.
- 7 (a) Does your school have peer counsellors?

(b) In your view are peer-support groups important in addressing the psychological needs of OVC?

SECTION F: TEACHERS' TRAINING IN HANDLING OVC

7. In your view are teachers at your school trained to deal with challenges confronting OVC in their classrooms?
8. What is the attitude of teachers towards OVC?
9. What are the common problems affecting OVC that teachers normally refer to you?
- 10 Comment on your relationship with other teachers in the school.

SECTION G: EVALUATION OF THE ROLE OF SCHOOL COUNSELLORS

- 11 In your view, how important is the school-counsellor to the well-being of in-school OVC?
- 12 Highlight challenges that militate against your role function.

SECTION H: SUGGESTIONS TO IMPROVE THE RESPONSIVENESS OF SCHOOLS TO THE NEEDS OF OVC

13 Suggest ways by which the role function of a school-counsellor can be improved to respond to the needs of OVC.

14 Suggest ways by which teachers can be empowered to deal with challenges affecting OVC in their classrooms

15 Do you have anything else to say about OVC that might improve the well-being of in-school OVC?

APPENDIX K: FOCUS GROUP DISCUSSION SCHEDULE FOR OVC

Topic: The responsiveness of rural primary schools in Zimbabwe to the needs of OVC.

FOCUS GROUP DISCUSSION ITEMS

INTRODUCTION

My name is Clyton Dekeza. I am a UNISA PhD student, conducting a research on the Responsiveness of Rural Primary Schools in Zimbabwe to the Needs of Orphan and Vulnerable Children.

Place of interview..... Date

Time.....

SECTION A: DEMOGRAPHIC DATA

Grade or level.....

SECTION B: PROVISION OF MATERIAL NEEDS

1. From your own view what are the material problems faced by in-school OVC?
2. a) Does the school respond to your material needs adequately?

b) Explain your answer
3. Who are the main sources of material support for OVC in your school?
4. In your view what are the best ways of addressing the material needs of OVC?

SECTION C: PROVISION OF PSYCHOLOGICAL NEEDS

5. What psychological problems do you face?
6. a) Does the school respond to your psychological problems adequately?

b) Explain your answer.

7. a) Does your school have a school counsellor?

b) What are the main duties of the school-counsellor?

8. a) Are there learner-groups at your school to address the psychological needs of OVC

b) Explain your answer

SECTION D: TEACHERS' TRAINING IN HANDLING OVC

9. In your view are teachers at your school trained to deal with problems confronting OVC?

10. What is the attitude of teachers towards OVC?

11. a) Do teachers at your school assist OVC to acquire identification documents?

b) Explain your answer

12. a) Does your school offer guidance and counselling?

b) What skills do you learn in this subject?

13. In your view how do teachers deal with absenteeism of OVC?

14. Suggest ways by which teachers can improve in addressing the educational needs of OVC.

SECTION E: EVALUATION OF SCHOOL-BASED PROGRAMMES

TARGETING OVC

15. Comment on the effectiveness of school-based programmes targeting OVC in the following areas:

(a)Material provision

(b)Psychological provision

(c)Emotional support

(d)Educational support

SECTION F:SUGGESTIONS TO MAKE SCHOOLS MORE RESPONSIVE TO THE NEEDS OF OVC.

Suggest ways to improve schools in addressing the needs of in-school OVC

APPENDIX L: DOCUMENT CHECKLIST.

Areas of focus	Documents analysed	Observation
Magnitude of OVC in sampled schools	<ul style="list-style-type: none">- Registers- Enrolment statistics	
Material support (Feeding schemes)	<ul style="list-style-type: none">- Inventory Registers	
Financial assistance	<ul style="list-style-type: none">- BEAM Records- Scholarships	
Psychological programmes	<ul style="list-style-type: none">- Logbook- Club register- G & C schemes of work- Referral records	
Programs targeting OVC	<ul style="list-style-type: none">- staff meetings minutes-SDC meetings minutes	
Workshop son OVC	School diary of activities	

APPENDIX M: ETHICS APPROVAL



COLLEGE OF EDUCATION RESEARCH ETHICS REVIEW COMMITTEE

18 May 2016

Ref : 2016/05/18/31152461/31/MC

Student: Mr C Dekeza

Student Number: 31182461

Dear Mr Dekeza

Decision: Ethics Approval

Researcher: Mr C Dekeza

Tel: +263773902651

Email: dekezaaclys@gmail.com

Supervisor: Prof. M Lekhetho

College of Education

Department of Educational Leadership and Management

Tel: +2712 429 3781

Email: lekhem@unisa.ac.za

Proposal: The responsiveness of rural primary schools in Zimbabwe to the needs of orphaned and vulnerable children

Qualification: D Ed in Socio Education

Thank you for the application for research ethics clearance by the College of Education Research Ethics Review Committee for the above mentioned research. Final approval is granted for the duration of the research.

The application was reviewed in compliance with the Unisa Policy on Research Ethics by the College of Education Research Ethics Review Committee on 18 May 2016.

The proposed research may now commence with the proviso that:

- 1) The researcher/s will ensure that the research project adheres to the values and principles expressed in the UNISA Policy on Research Ethics.*
- 2) Any adverse circumstance arising in the undertaking of the research project that is relevant to the ethicality of the study, as well as changes in the methodology, should be communicated in writing to the College of Education Ethics Review Committee. An amended application could be requested if there are substantial changes from the existing proposal, especially if those changes affect any of the study-related risks for*



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APPENDIX N:DECLARATIONOFPROFESSIONAL EDIT



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14 November 2017

Declaration of professional edit

THE RESPONSIVENESS OF RURAL PRIMARY SCHOOLS IN ZIMBABWE TO THE NEEDS OF
ORPHANED AND VULNERABLE CHILDREN

by

CLYTON DEKEZA

I declare that I have edited and proofread this thesis. My involvement was restricted to language usage and spelling, completeness and consistency, referencing style and formatting of headings, captions and Tables of Contents. I did no structural re-writing of the content.

I am qualified to have done such editing, being in possession of a Bachelor's degree with a major in English, having taught English to matriculation, and having a Certificate in Copy Editing from the University of Cape Town. I have edited more than 100 Masters and Doctoral theses, as well as articles, books and reports.

Sincerely,



Dr Jacqueline Baumgardt
Member, Professional Editors Guild